

F1 Help Text

CE03
CE04

HEALTH PROBLEM --

Disease, illness, or a problem with the functioning of the body or organs. Health problems may be either physical or mental.

An example of a health problem is influenza; some of its symptoms are fever, chills, and dizziness. Health problems may be either physical or mental. **Be sure to record health problems only; do not record symptoms here unless the respondent cannot give a condition name.**

For this study, **pregnancy is also considered a medical condition, and SHOULD be recorded on the conditions roster.** Although not an illness or impairment, it calls for medical advice and assistance and is an important element in a study of health care utilization and costs.

HE01
HE03
HE06

IMPAIRMENT --

Examples include missing limbs, fingers or other body parts; partial paralysis from an early case of polio, accident or war wound; stiff joints, deformed fingers or other physical evidence of arthritis; and vision or hearing loss.

HELP/SUPERVISION --

Help or supervision from another person includes a range of behaviors. The concept encompasses:

- personal assistance in physically doing the activity (including another person doing the entire activity, such as bathing a person from head to toe);
- instruction (guiding the person through the activity);
- making sure the activity is done correctly, without harm; and
- staying nearby in case the person needs help in the activity.

HE04

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HE07

AIDS/SPECIAL EQUIPMENT --

In the phrase 'aids or any other special equipment', the key word is 'special'. Special equipment includes any device that is not used by the general population to perform a specific activity. There are many kinds of special equipment:

- mobile devices, such as motorized wheelchairs, canes and walkers;
- special spoons, plate guards, or hand splints used to aid in feeding;
- orthopedic shoes or braces;
- stationary devices, such as railings and ramps;
- computers or communication boards to assist speech;
- TTY - telephones or telephone amplifiers for hearing impaired; and
- bathroom rails or bars, bathing benches or chairs.

HE19

LIMITED ABILITY --

Difficulties in performing a task independently. We are only interested in difficulties that are associated with an impairment or a PHYSICAL OR MENTAL HEALTH PROBLEM. Limited activity ability (for example, work activity) means that a person cannot do the role as long or in the same way as he/she did previous to the impairment or physical or mental health problem, but still does it to some extent (as opposed to not being able to do it at all).

IMPAIRMENT --

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HE22

LIMITED IN PARTICIPATING --

Difficulties that limit the person's ability to participate in the activities. We are only interested in difficulties that are associated with an impairment or a PHYSICAL OR MENTAL HEALTH PROBLEM. Limited activity participation (for example, playing sports) means that a person cannot do the activity as long or in the same way as he/she did previous to the impairment or physical or mental health problem, but still does it to some extent (as opposed to not being able to do it at all).

HE31

BLIND --

Refers to persons who cannot see at all or who only have light perception. It also includes persons who are considered legally blind. Legal blindness is defined as visual acuity of 20/200 or less in the better eye (WITH the best possible correction) or as a visual field of 20 degrees or less.

HE28

DEAF --

Refers to inability to hear in BOTH EARS without the use of hearing aids. Also can include hearing loss greater than 70 dB (decibels) in the better ear without hearing aids.

DD02

DD05

DD10

HALF DAY OR MORE --

If a person's work or school day is 9:00 a.m. to 3 p.m., for example, and he/she stayed home from work or school (because of a physical or mental health problem) for more than 3 hours of that time, we consider this as having missed a half day or more. If a person's work FOR PAY is usually done at home, or if a person does housework for pay, include any half days missed from such work when it is due to illness or injury.

CN01
CN01A

ACCIDENT/INJURY --

Physical problems because of some sort of external trauma to the body such as a fall or being in an auto accident. This refers to unexpected and undesirable events. Accidents may include poisonings, where the condition results from swallowing, breathing, or coming in contact with some poisonous substance. Illnesses and other types of problems due to a natural process in the body, such as any type of disease, should NOT be included.

PP04
PP05

MEDICAL PROFESSIONALS AND PRACTITIONERS --

MEDICAL DOCTOR -

Include both doctors of medicine (M.D.) and doctors of osteopathy (D.O.). Specific examples of physicians include:

allergists	obstetricians
anesthesiologists	ophthalmologists
cardiologists	orthopedists
dermatologists	otolaryngologists
endocrinologists	(ear, nose, & throat doctor)
family practice physicians	pediatricians
gastroenterologists	psychiatrists
general physicians	physiatrist (rehab medicine)
geriatricians	radiologists
gynecologists	surgeons (any)
internists	urologists
neurologists	

Types of providers NOT to be counted as medical doctors are chiropractors, dentists, nurses, optometrists, paramedics, podiatrists, psychologists.

NURSE -

Includes several types of nursing specialists, such as registered nurse (RN), licensed practical nurse (LPN), nurse's aide, occupational health nurse, community health nurse, or public health nurse (PHN).

NURSE PRACTITIONER -

A registered nurse (RN) who has completed additional training beyond basic nursing education. They have qualifications which permit them to carry out expanded health care evaluation and decision-making regarding patient care.

PARAMEDIC -

A medical person who is licensed to perform advanced cardiac life support procedures and other emergency medical treatment under the direction of a physician.

HEALTH AIDE -

A nursing assistant who provides personal care and home management services to allow patients to live in their own homes. They work under the supervision of a physician or registered nurse and may help patients bathe, exercise, and dress. They may also check the patient's temperature, blood pressure, pulse and respiration rates, and help give medications.

PHYSICIAN'S ASSISTANT -

A Physician Assistant (PA) is a medical person who provides health care services with the direction and supervision of a doctor of medicine (MD) or osteopathic physician (DO). Physician Assistants train for several years in order to earn the certification to perform diagnostic, therapeutic, preventive, and health maintenance services. Not to be confused with non-medical persons who also 'assist' the physician.

MIDWIFE -

A female who practices the art of aiding in the delivery of babies.

NURSE MIDWIFE -

A nurse who provides medical care and treatment to ob/gyn patients under the supervision of a physician or doctor. The duties of a nurse midwife may include routine gynecological care, delivering babies, instructing patients in prenatal and postnatal health practices, instructing patient in the care of herself and the infant, examinations, etc.

OPTOMETRIST -

A medical person who examines the eyes and vision system for visual defects, diagnoses eye impairments, prescribes corrective lenses, and provides other types of treatment. Not to be confused with an M.D. who specializes in treating eye diseases, such as an ophthalmologist.

OPHTHALMOLOGIST -

A doctor of medicine (MD) who specializes in treating eye diseases.

PODIATRIST (FOOT DOCTOR) -

A podiatrist (DPM) (sometimes referred to as a 'foot doctor'), is a medical person who deals with examination, diagnosis, treatment, and prevention of diseases, conditions, and malfunctions affecting the human foot and its related structures.

CHIROPRACTOR -

Medical persons who practice a system of medicine based on the principles that the nervous system largely determines the state of health and that disease results from nervous system malfunctioning. Treatment consists primarily of the adjustment and manipulation of parts of the body, especially the spinal column.

ACUPUNCTURIST -

Persons who use a technique for relieving pain, treating medical conditions, inducing regional anesthesia, or improving general well-being, in which thin needles are inserted into the body at specific points.

PHYSICAL THERAPIST -

Medical person who is concerned with the treatment of musculoskeletal disorders with physical agents and methods -- such as massage, manipulation, therapeutic exercises, cold, heat, hydrotherapy, electric stimulation, and light -- to assist in rehabilitating patients and in restoring normal function after an illness or injury.

SPEECH THERAPIST -

A medical person trained in the application and use of techniques aimed at improving language and speech disorders.

OCCUPATIONAL THERAPIST -

Medical persons who are concerned with improving the person's ability to perform self help tasks, tasks that are associated with employment activities, or tasks that allow an individual to more fully enjoy and participate in leisure time activities. Occupational therapy is used in retraining individuals after illnesses and accidents, as well as providing ongoing help to persons with more permanent disabilities from stroke, paralysis or deterioration from degenerative diseases such as arthritis or multiple sclerosis.

AUDIOLOGIST -

Medical persons who evaluate and treat patients with impaired hearing and balance. This includes the fitting and dispensing of hearing aids.

PHYSIATRIST -

Medical doctor who specializes in rehabilitation medicine. Frequently directs a team of medical professionals which can include occupational and physical therapists.

MENTAL HEALTH PROFESSIONALS --

PSYCHIATRIST -

A physician who specializes in dealing with the prevention, diagnosis, and treatment of mental, addictive, and emotional disorders, such as psychoses, depression, anxiety disorders, substance abuse disorders, developmental disabilities, sexual dysfunctions, and adjustment reactions.

PSYCHOLOGIST -

A non-physician who specializes in the counseling and testing of persons with mental, addictive, or emotional disorders.

PSYCHIATRIC SOCIAL WORKER -

A psychiatric social worker is a social worker who usually works in a psychiatric hospital, residential treatment center, psychiatric unit of a general hospital, or a mental health center. A psychiatric social worker assists individuals and their families in dealing with social, emotional, and environmental problems resulting from mental illness or disability. A psychiatric social worker serves as a link between the patient, psychiatrist, clinical psychologist, family, and community.

A Licensed Clinical Social Worker (LCSW) is another type of psychiatric social worker. An LCSW may practice at any one of the above sites, but may also have his or her own private practice and may bill independently.

Include visits to other social workers or counselors if the visit would be reimbursed by insurance. That is, if there is a charge for the service that an insurance company would pay for, the service should be included.

MENTAL HEALTH THERAPIST -

A person trained to diagnose and treat emotional or mental health problems, including, psychiatrists, psychologists, counselors, social workers, etc.

MEDICAL FACILITY OR CLINIC --

HEALTH CLINIC -

Refers to a facility where medical care and advice are given by doctors, nurses, or other medical persons, but is not located at a hospital.

WALK-IN SURGI-CLINIC/CENTER -

A facility performing minor surgical procedures on an outpatient basis, and NOT located in, or affiliated with a hospital (i.e. NOT an outpatient department at a hospital).

COMPANY CLINIC -

A company doctor's office or medical facility which is operated principally for the employees (and sometimes their dependents).

SCHOOL CLINIC -

A clinic which is operated principally for students (and sometimes their dependents) who are enrolled at a college or university.

INFIRMARY -

A place for care of sick or injured people, especially a small hospital or dispensary in an institution such as a school or other institution.

NEIGHBORHOOD HEALTH CLINIC -

A free-standing facility located where it will be easy for patients to go, which provides diagnostic and treatment services. Neighborhood health clinics are frequently maintained by government agencies or private organizations.

FAMILY PLANNING CENTER -

A facility that provides social, educational, or medical services and supplies to help individuals determine family size or prevent unplanned pregnancies. This may include birth control counseling and referral, abortion services and referral, pregnancy testing, sterilization counseling, venereal disease referrals, public education service, and infertility counseling and referrals.

MENTAL HEALTH FACILITY -

A facility that provides the diagnosis, treatment, and care of patients with mental disorders.

RETAIL CLINIC -

A clinic located inside a pharmacy, grocery store, or discount retailer. (Examples include MinuteClinic, Take Care, and Target Clinics.) These clinics may offer patients more convenience and/or a lower cost for non-emergency care. The services available at retail clinics typically include diagnostic and preventive screenings as well as basic immunizations. Some retail clinics with expanded services may treat acute conditions and provide referral management.

DENTAL CARE --

DENTIST -

Medical persons whose primary occupation is caring for teeth, gums, and jaws. Dental care includes general work such as fillings, cleaning, extraction, and also specialized work such as root canals, fittings for braces, etc.

DENTAL SURGEON/ ORAL SURGEON -

A dental surgeon is a specialist who deals with diseases, injuries, and defects of the mouth and jaw through invasive procedures. Includes specialties like endodontists, prosthodontists and orthodontists.

An oral and maxillofacial surgeon (OMFS) is a surgical specialty devoted to the well-defined anatomical region of the mouth, jaws and the face as well as associated structures. Most oral surgeons are initially qualified in dentistry and have undergone a further 4-6 years of specialty surgical training.

ORTHODONTIST -

A dental specialist who deals with preventing and correcting irregular teeth through devices such as braces and retainers.

DENTAL HYGIENIST -

A person who is licensed to give certain dental services under the supervision of a dentist. These services include: teeth cleaning, x-rays, applying medications, and educating in dental matters.

DENTAL TECHNICIAN -

A person who works in a dental laboratory and prepares dentures and other appliances such as orthodontic devices and crowns to fit dental prescriptions.

DENTAL ASSISTANT -

A person who assists a dentist in patient care, and may perform other functions in the dental office or laboratory. Most dental assistants are trained by the dentist.

PP06
PP07

TYPES OF HOSPITAL SERVICES :

HOSPITAL STAY --

A visit to a hospital where a person is admitted to the hospital. While most in-patient stays are 24-hours or longer, a person need not have stayed overnight to have been "admitted" to a hospital; it is possible to be admitted and discharged on the same day.

EMERGENCY ROOM VISIT --

Any visit made during the person's reference period to a hospital emergency room.

EMERGENCY ROOM -

A medical department at a hospital that is open 24 hours a day where no appointment is necessary in order to receive care. Medical care may be administered by a physician, nurse, physician assistant, or other medical provider. Do NOT include 'urgent care centers', which are owned by, or affiliated with a hospital. Visits made to that type of facility should be coded as an outpatient department visit.

OUTPATIENT DEPARTMENT VISIT --

Any visit made during the person's reference period to a hospital outpatient department.

OUTPATIENT DEPARTMENT -

A unit of a hospital, a facility, or 'urgent care center' owned by or affiliated with a hospital. The outpatient department provides health and medical services to individuals who do not require hospitalization overnight and may also provide general primary care.

Do NOT include 'urgent care centers' which are not owned by, or affiliated with a hospital. Urgent care centers which are NOT affiliated with or owned by a hospital should be coded as a Medical Provider visit. Include visits made to outpatient departments for medical tests only.

Examples of outpatient departments include:

- well-baby clinics/pediatric OPD;
- obesity clinics;
- eye, ear, nose, and throat clinics;
- cardiology clinic;
- internal medicine department;
- family planning clinics;
- alcohol and drug abuse clinics;
- physical therapy clinics; and
- radiation therapy clinics.

PP07B
PP07BB
PP22B
PP22BB

An alternative care professional provides specific alternative health care. The provider may have formalized training and received certification by a licensing board or related professional association, but some of these alternative care practices are not usually taught in U.S. medical schools or generally available in U.S. hospitals. Examples of alternative care providers are:

ACUPUNCTURIST -

Usually a medical person who uses a technique for relieving pain, treating medical conditions, inducing regional anesthesia, or improving general well-being, in which thin needles are inserted into the body at specific points. Acupuncture can also be practiced by medical doctors (MD's).

MASSAGE THERAPIST -

A person who treats a health problem through manipulation, methodical pressure, friction or kneading of the body.

HOMEOPATHIC -

A person who treats health problems based on a system of medicine based on the principle of 'like cures like.' Substances that cause the symptoms of a particular health problem are used in very small doses to treat the problem.

NATUROPATHIC -

A person who treats health problems based on the curative abilities of nature's elements, such as sun, water, air and earth. Many naturopathic physicians also use modern medical methods in conjunction with naturopathic therapies.

HERBALIST -

A person who uses plant-based substances to prevent or treat a health problem or to maintain good health. Herbal remedies are available in many forms, including pills, liquids and crèmes.

ALTERNATIVE/COMPLEMENTARY CARE -

Approaches to health care that are different from those typically practiced by medical doctors in the U.S. Included in this type of care are acupuncture, nutritional advice or lifestyle diets, massage therapy, herbal remedies, bio-feedback training, meditation, imagery, or relaxation techniques, homeopathic treatment, spiritual healing or prayer, hypnosis, and traditional medicine, such as Chinese, Ayurvedic, American Indian, etc.

PP07A
PP07AA
PP22A
PP22AA

An independent laboratory or testing facility is independent of any physician's office or hospital. A physician may direct the laboratory and perform diagnostic laboratory services for other physicians. If a physician maintains a laboratory to complete diagnostic laboratory services in connection with his own practice, it is not considered to be an independent laboratory or testing facility.

PP08
PP09
PP23
PP24

SKILLED MEDICAL CARE --

Home care from a nurse, any type of therapist, a doctor, a social worker, or anyone else providing nursing or medical care.

PERSONAL CARE --

Home care services including bathing, dressing, or help getting around the house either paid or unpaid.

HOUSEHOLD CHORE SERVICES --

Help in the home with services like cooking or cleaning either paid or unpaid.

COMPANIONSHIP--

Services such as reading, talking, or going for a walk, a drive, or to a restaurant either paid or unpaid.

PP10
PP11

TYPES OF HEALTH CARE FACILITIES --

INPATIENT REHABILITATION FACILITY OR CONVALESCENT HOME -

A nursing facility primarily designed to provide a home-like environment while patients recover from long-term illnesses or medical procedures, or who require continued care for an ongoing illness that is not in an acute stage. This is not the same as a retirement home.

NURSING HOME -

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

RESIDENTIAL MENTAL HEALTH TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with mental or emotional disorders. Do not include 'day care' facilities for persons with intellectual disabilities.

RESIDENTIAL EATING DISORDER TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with eating disorders.

RESIDENTIAL DRUG AND ALCOHOL TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with drug and/or alcohol addiction disorders.

RESIDENTIAL ADDICTION TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with addiction disorders not classified above (i.e., gambling, sexual).

HOSPICE CARE -

A type of program that provides care and support services to the terminally ill. The intent is to allow the patient to live as fully as possible. Care and support may come from a variety of sources such as family, volunteers, nurses, social workers, the clergy, as well as physicians.

Do NOT include hospice care services delivered at the patient's home. Care provided in the home should be coded as home health.

RESPITE CARE -

Care received for only a limited time by severely disabled or impaired persons (e.g., quadriplegics, developmentally disabled children or adults, or Alzheimer's patients) in a long-term health care place (e.g., a nursing home) or another person's home, as a way of providing an interval of rest or relief to family members who are the usual primary caregivers at home.

PP12
PP13
PP27
PP28

EYEGASSES --

Devices worn outside the eye to correct vision problems. A magnifying glass for reading is not considered glasses.

CONTACT LENSES --

A curved shell of glass or plastic worn directly against the eye to correct vision problems.

INSULIN --

A chemical used in the treatment of diabetes. Typically, insulin is administered with a syringe by the patient.

SYRINGES (DIABETIC SUPPLIES)--

An instrument used to inject insulin into the body for treatment of diabetes.

TEST PAPER (TEST STRIPS)--

Pre-treated paper, prescribed by a physician, used to gauge the level of sugar present in the body at a given time.

OTHER DIABETIC EQUIPMENT OR SUPPLIES --

Any other type of diabetic equipment or supplies not listed here that is typically prescribed by a physician; for example, a blood glucose monitor machine, glucose meter, insulin pumps, lancets, alcohol swabs or control solution.

PP13A
PP13B
PP29
PP30
EV03A
EV03AOV
ED06A
ED06AOV

AMBULANCE SERVICES -

Any charges associated with the use of an emergency vehicle used for transporting patients to a health care facility after injury or illness. Includes three basic types of emergency transportation: ground or surface, helicopter, or airplane.

ORTHOPEDIC ITEMS -

Items used to prevent, correct, or assist with disorders of the musculoskeletal system (e.g., skeleton, joints, muscles, ligaments, etc.). Orthopedic items include, but are not limited to, corrective shoes and inserts, braces, crutches, canes, walkers, wheelchairs, and scooters.

HEARING DEVICES -

Items used to correct or assist with impaired hearing. Hearing devices include, but are not limited to, hearing aids, amplifiers for a telephone, adaptive speech equipment, and speech synthesizers

PROSTHESES -

An artificial replacement for a missing body part, such as an hand, arm or leg, eye that is used for functional and/or cosmetic reasons

BATHROOM AIDS -

Items used to assist in the process of bathing, showering, or using the toilet. Bathroom aids include, but are not limited to, portable commodes, raised toilet seats, portable tub seats, handrails, or other bathing equipment.

MEDICAL EQUIPMENT -

Includes durable medical items used to assist with an impairment or physical health problem. Medical equipment includes, but is not limited to, hospital beds, lifts (used to help the person out of chairs), monitors (used to measure body functions such as heart rate, blood pressure, or breathing, intercom systems used to listen to person, etc.), special chairs, oxygen, bed pans, adaptive feeding equipment, vaporizers, and nebulizers.

DISPOSABLE SUPPLIES -

Includes disposable medical items used in the treatment of a health problem. Disposable supplies include, but are not limited to, ostomy supplies, bandages, dressings, tape, adult disposable diapers, catheters, syringes, and IV supplies.

ALTERATIONS/MODIFICATIONS -

Alterations or modifications to the person's home or automobile to help him/her function better with his/her impairment or physical problem. Examples of changes to the home include ramps, handrails, elevators, or stair lifts. Examples of changes to the automobile include special controls, mirrors, doors, or wheelchair lifts.

PP15
PP16

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PP17
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MEDICAL DOCTOR --

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dermatologists	otolaryngologists
endocrinologists	(ear, nose, & throat doctor)
family practice physicians	pediatricians
gastroenterologists	psychiatrists
general physicians	physiatrist (rehab medicine)
geriatricians	radiologists
gynecologists	surgeons (any)
internists	urologists
neurologists	

Types of providers NOT to be counted as medical doctors are chiropractors, dentists, nurses, optometrists, paramedics, podiatrists, psychologists.

NURSE --

Includes several types of nursing specialists, such as registered nurse (RN), licensed practical nurse (LPN), nurse's aide, occupational health nurse, community health nurse, or public health nurse (PHN).

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A nurse who provides medical care and treatment to ob/gyn patients under the supervision of a physician or doctor. The duties of a nurse midwife may include routine gynecological care, delivering babies, instructing patients in prenatal and postnatal health practices, instructing patient in the care of herself and the infant, examinations, etc.

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PP19
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- alcohol and drug abuse clinics;
- physical therapy clinics; and
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PP21
PP22

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SCHOOL CLINIC -

A clinic which is operated principally for students (and sometimes their dependents) who are enrolled at a college or university.

INFIRMARY -

A place for care of sick or injured people, especially a small hospital or dispensary in an institution such as a school or other institution.

NEIGHBORHOOD HEALTH CLINIC -

A free-standing facility located where it will be easy for patients to go, which provides diagnostic and treatment services. Neighborhood health clinics are frequently maintained by government agencies or private organizations.

FAMILY PLANNING CENTER -

A facility that provides social, educational, or medical services and supplies to help individuals determine family size or prevent unplanned pregnancies. This may include birth control counseling and referral, abortion services and referral, pregnancy testing, sterilization counseling, venereal disease referrals, public education service, and infertility counseling and referrals.

MENTAL HEALTH FACILITY -

A facility that provides the diagnosis, treatment, and care of patients with mental disorders.

RETAIL CLINIC -

A clinic located inside a pharmacy, grocery store, or discount retailer. (Examples include MinuteClinic, Take Care, and Target Clinics.) These clinics may offer patients more convenience and/or a lower cost for non-emergency care. The services available at retail clinics typically include diagnostic and preventive screenings as well as basic immunizations. Some retail clinics with expanded services may treat acute conditions and provide referral management.

MENTAL HEALTH PROFESSIONALS --

PSYCHIATRIC SOCIAL WORKER -

A psychiatric social worker is a social worker who usually works in a psychiatric hospital, residential treatment center, psychiatric unit of a general hospital, or a mental health center. A psychiatric social worker assists individuals and their families in dealing with social, emotional, and environmental problems resulting from mental illness or disability. A psychiatric social worker serves as a link between the patient, psychiatrist, clinical psychologist, family, and community.

A Licensed Clinical Social Worker (LCSW) is another type of psychiatric social worker. An LCSW may practice at any one of the above sites, but may also have his or her own private practice and may bill independently.

Include visits to other social workers or counselors if the visit would be reimbursed by insurance. That is, if there is a charge for the service that an insurance company would pay for, the service should be included.

MENTAL HEALTH THERAPIST -

A person trained to diagnose and treat emotional or mental health problems, including, psychiatrists, psychologists, counselors, social workers, etc.

PP25

PP26

INPATIENT REHABILITATION FACILITY OR CONVALESCENT HOME --

A nursing facility primarily designed to provide a home-like environment while patients recover from long-term illnesses or medical procedures or who require continued care for an ongoing illness that is not in an acute stage. This is not the same as a retirement home.

NURSING HOME --

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

RESIDENTIAL MENTAL HEALTH TREATMENT CENTER --

A residential facility that provides diagnostic and treatment services to patients with mental or emotional disorders. Do not include 'day care' facilities for persons with intellectual disabilities.

RESIDENTIAL EATING DISORDER TREATMENT CENTER --

A residential facility that provides diagnostic and treatment services to patients with eating disorders.

RESIDENTIAL DRUG AND ALCOHOL TREATMENT CENTER --

A residential facility that provides diagnostic and treatment services to patients with drug and/or alcohol addiction disorders.

RESIDENTIAL ADDICTION TREATMENT CENTER --

A residential facility that provides diagnostic and treatment services to patients with addiction disorders not classified above (i.e., gambling, sexual).

HOSPICE CARE --

A type of program that provides care and support services to the terminally ill. The intent is to allow the patient to live as fully as possible. Care and support may come from a variety of sources such as family, volunteers, nurses, social workers, the clergy, as well as physicians.

Do NOT include hospice care services delivered at the patient's home. Care provided in the home should be coded as home health.

RESPITE CARE --

Care received for only a limited time by severely disabled or impaired persons (e.g., quadriplegics, developmentally disabled children or adults, or Alzheimer's patients) in a long-term health care place (e.g., a nursing home) or another person's home, as a way of providing an interval of rest or relief to family members who are the usual primary caregivers at home.

EV02

HOSPITAL STAY --

A visit to a hospital where a person is admitted to the hospital. While most in-patient stays are 24-hours or longer, a person need not have stayed overnight to have been "admitted" to a hospital; it is possible to be admitted and discharged on the same day.

EMERGENCY ROOM VISIT --

Any visit made during the person's reference period to a hospital emergency room.

EMERGENCY ROOM -

A medical department at a hospital that is open 24 hours a day where no appointment is necessary in order to receive care. Medical care may be administered by a physician, nurse, Physician assistant, or other medical provider. Do NOT include 'urgent care centers', which are owned by, or affiliated with a hospital. Visits made to that type of facility should be coded as an outpatient department visit.

OUTPATIENT DEPARTMENT VISIT --

Any visit made during the person's reference period to a hospital outpatient department.

OUTPATIENT DEPARTMENT -

A unit of a hospital, a facility, or 'urgent care center' owned by or affiliated with a hospital. The outpatient department provides health and medical services to individuals who do not require hospitalization overnight and may also provide general primary care.

Do NOT include 'urgent care centers' which are not owned by, or affiliated with a hospital. Urgent care centers which are NOT affiliated with or owned by a hospital should be coded as a Medical Provider visit. Include visits made to outpatient departments for medical tests only.

Examples of outpatient departments include:

- well-baby clinics/pediatric OPD;
- obesity clinics;
- eye, ear, nose, and throat clinics;
- cardiology clinic;
- internal medicine department;
- family planning clinics;
- alcohol and drug abuse clinics;
- physical therapy clinics; and
- radiation therapy clinics.

MEDICAL PROVIDER VISIT --

Any visit made during the person's reference period to a specific setting of care where a medical provider was seen. Settings of care can include: a private doctor's office, a clinic, a health maintenance organization (HMO), an independent laboratory or X-ray facility or an 'urgent care center' not owned by or affiliated with a hospital.

MEDICAL PROVIDER - A doctor, nurse, or any other medical person or place that delivers medical or health related care.

DENTAL CARE VISIT --

Any visit made during the person's reference period to a dental care provider for the purpose of dental care.

DENTAL CARE PROVIDER - Medical persons whose primary occupation is caring for teeth, gums, and jaws. Dental care includes general work such as fillings, cleaning, extractions, and also specialized work such as root canals, fittings for braces, etc.

HOME HEALTH VISIT --

Visits to the home from persons (e.g. nurses, home health aides, social workers, therapists, or medical doctors) who provide help to a person who has a health problem or condition.

Non-medical services such as cleaning or cooking may be included if the service is provided because a person has a health problem. Such a person can be paid or unpaid, such as a friend, neighbor, relative or volunteer.

OTHER MEDICAL EXPENSES EVENT --

COLLECTED AT ALL ROUNDS:

Any purchase made during the reference period of one of the following types of medical supplies:

1. GLASSES OR CONTACT LENSES - The actual purchase of the item during the reference period; eye exams should be classified as a medical provider visit.
2. INSULIN - Any purchases of this drug during the reference period.
3. OTHER DIABETIC EQUIPMENT OR SUPPLIES - Any purchases of any diabetic supplies or equipment, other than insulin, made during the reference period. Include purchases of supplies prescribed by a physician such as syringes, test paper or strips, blood glucose monitors, glucose meters, insulin pumps, lancets, alcohol swabs or control solution. Even if during the reference period, a person purchased or obtained multiple items from a single group, for example, glasses AND contact lenses, create only one OM event in CAPI.

COLLECTED DURING ROUNDS 3 AND 5 ONLY:

4. Such medical expenses as hearing devices, ambulance services, wheelchairs, bathroom aids, prostheses, etc. are collected only in Rounds 3 and 5. These types of additional medical expenses are collected for a longer reference period, (between January 1st and December 31st)i.e., once per year.

If, during the calendar year, the person purchased or obtained multiple items from a single group, such as oxygen AND a hospital bed (both considered medical equipment), create only one OM event in CAPI.

If a person obtained multiple items from different groupings, such as a portable commode (bathroom aids) AND a wheelchair (orthopedic items) during the calendar year, then two OM events should be created in CAPI.

INSTITUTIONAL/LONG TERM HEALTH CARE STAY EVENT --

When an RU member is admitted to one of the following types of health care institutions (which are not a hospital or a permanent residence):

INPATIENT REHABILITATION FACILITY OR CONVALESCENT HOME -

A nursing facility primarily designed to provide a home-like environment while patients recover from long-term illnesses or medical procedures, or who require continued care for an ongoing illness that is not in an acute stage. This is not the same as a retirement home.

NURSING HOME -

An institution that provides continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

RESIDENTIAL MENTAL HEALTH TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with mental or emotional disorders. Do not include 'day care' facilities for persons with intellectual disabilities.

RESIDENTIAL EATING DISORDER TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with eating disorders.

RESIDENTIAL DRUG AND ALCOHOL TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with drug and/or alcohol addiction disorders.

RESIDENTIAL ADDICTION TREATMENT CENTER -

A residential facility that provides diagnostic and treatment services to patients with addiction disorders not classified above (i.e., gambling, sexual).

HOSPICE CARE -

A type of program that provides care and support services to the terminally ill. The intent is to allow the patient to live as fully as possible. Care and support may come from a variety of sources such as family, volunteers, nurses, social workers, the clergy, as well as physicians.

Do NOT include hospice care services delivered at the patient's home. Care provided in the home should be coded as home health.

RESPITE CARE -

Care received for only a limited time by severely disabled or impaired persons (e.g., quadriplegics, developmentally disabled children or adults, or Alzheimer's patients) in a long-term health care place (e.g., a nursing home) or another person's home, as a way of providing an interval of rest or relief to family members who are the usual primary caregivers at home.

EV06

FRIEND/NEIGHBOR --

A medical or non-medical person providing some type of home health services to the RU member. This person must fulfill the following requirements:

1. Friend/neighbor was not paid.
2. Friend/neighbor is not part of the RU or DU.
3. Friend/neighbor is not related to the RU member receiving the care.
4. Friend/neighbor is not providing the care because of an affiliation with a volunteer group.

RELATIVE --

A medical or non-medical person providing some type of home health services to the RU member. This person must fulfill the following requirements:

1. Relative is not part of the RU or DU.
2. Relative is RELATED to the RU member receiving the care.
3. Relative is not providing the care because of an affiliation with a volunteer group.
4. Relative can be either paid or not-paid.

VOLUNTEER --

A medical or non-medical person providing some type of home health services to the RU member. This person must fulfill the following requirements:

1. Volunteer was not paid.
2. Volunteer is not part of the RU or DU.
3. Volunteer is not related to the RU member receiving the care.
4. Volunteer has an affiliation with a volunteer group that provides home care services to the RU member.

OTHER-PAID --

A medical or non-medical person, group or agency providing some type of home health services to the RU member. Any type of provider who was PAID (other than a relative) should be included in this group.

MEAL DELIVERY SERVICE --

Any public or private services that ONLY provide meals to individuals at home. For example, Meals-on-Wheels.

HOME HEALTH CARE includes services received due to a health problem or condition. These services may be medical (e.g., physical therapy; checking temperature, blood pressure, and pulse and respiration rates; or helping to give medications) or personal (e.g., cleaning, repairs, cooking, or companionship).

EV07OV1
EV07OV2

MOTHER --

A female parent.

FATHER --

A male parent.

SISTER --

A female relative having the same parent(s) as another.

BROTHER --

A male relative having the same parent(s) as another.

GRANDPARENT --

A parent of one's mother or father.

GRANDCHILD --

A child of one's daughter or son.

AUNT --

The sister of one's father or mother or the wife of one's uncle.

UNCLE --

The brother of one's father or mother or the husband of one's aunt.

NIECE --

A daughter of one's brother or sister.

NEPHEW --

A son of one's brother or sister.

COUSIN --

A child of one's uncle, aunt, or cousin.

EV10
EV10OV

COMPANION --

Persons who care for elderly, disabled, or convalescent persons by attending to the patient's personal needs, reading aloud, playing cards, or other games to entertain the RU member because of the RU member's health problem.

DOMESTIC WORKER --

Persons who provide cleaning, cooking, or other household chores services for the RU member because of his or her health problem.

HOUSE CLEANER --

Persons who provide cleaning services for the RU member because of his or her health problem.

HEALTH PROFESSIONAL --

A person whose job is to provide medical treatment, nursing care, or therapy to persons with health problems. Examples include medical doctors, nurses, and physical therapists.

HOMEMAKER --

Persons who advise or help the RU member in dealing with problems, such as nutrition, cleanliness, and household utilities because of his or her health problem.

HOME HEALTH AIDE --

A certified health care worker who provides personal care and home management services to allow patients to live in their own homes. Working under the supervision of a physician or registered nurse, the home health aide may provide any of the following services: patient bathing, exercise, dressing, assisting the patient with medications, checking patient temperature, blood pressure, respiration, and pulse.

NURSE'S AIDE --

Persons who may perform any combination of tasks, and may be directed by nursing and medical staff, to care for patients at home. Their duties may include bathing patients; giving alcohol rubs; measuring and recording the intake and output of liquids; taking and recording temperature, pulse and respiration rates; examining equipment to detect maintenance needs and notifying the supervisor of these needs.

PERSONAL CARE ATTENDANT --

Non-medical persons who are usually paid (but can be unpaid) who help a disabled persons perform activities of daily living including: bathing, dressing, meal preparation, feeding, paying bills, and transportation.

EV11
EV110V

DIETITIAN/NUTRITIONIST --

Persons concerned with the application of the principles of nutrition to plan and supervise the preparation and serving of meals. Includes planning menus and diets for special nutritional requirements; participating in research; or instructing in the field of nutrition.

HOME HEALTH AIDE --

A certified health care worker who provides personal care and home management services to allow patients to live in their own homes. Working under the supervision of a physician or registered nurse, the home health aide may provide any of the following services: patient bathing, exercise, dressing, assisting the patient with medications, checking patient temperature, blood pressure, respiration, and pulse.

HOSPICE WORKER --

A person who provides health and personal care in the home to persons who are dying. They may administer medical treatments, help people bathe, dress, and eat, or help them manage their household affairs.

I.V./INFUSION THERAPIST --

A person who administers, monitors, and maintains equipment which is used to provide medication or nutrition intravenously (placed in a person's body by inserting a needle into a vein). The needle is attached to a tube and bag, and is left in place for an extended period of time. The bag is replaced when empty.

MEDICAL DOCTOR --

Include both doctors of medicine (M.D.) and doctors of osteopathy (D.O.). Specific examples of physicians include:

allergists	obstetricians
anesthesiologists	ophthalmologists
cardiologists	orthopedists
dermatologists	otolaryngologists
endocrinologists	(ear, nose, & throat doctor)
family practice physicians	pediatricians
gastroenterologists	psychiatrists
general physicians	physiatrist (rehab medicine)
geriatricians	radiologists
gynecologists	surgeons (any)
internists	urologists
neurologists	

Types of providers NOT to be counted as medical doctors are chiropractors, dentists, nurses, optometrists, paramedics, podiatrists, psychologists.

NURSE --

Includes several types of nursing specialists, such as registered nurse (RN), licensed practical nurse (LPN), nurse's aide, occupational health nurse, community health nurse, or public health nurse (PHN).

NURSE PRACTITIONER --

A registered nurse (RN) who has completed additional training beyond basic nursing education. They have qualifications which permit them to carry out expanded health care evaluation and decision-making regarding patient care.

NURSE'S AIDE --

Persons who may perform any combination of tasks, and may be directed by nursing and medical staff, to care for patients at home. Their duties may include bathing patients; giving alcohol rubs; measuring and recording the intake and output of liquids; taking and recording temperature, pulse and respiration rates; examining equipment to detect maintenance needs and notifying the supervisor of these needs.

OCCUPATIONAL THERAPIST --

Medical persons who are concerned with improving the person's ability to perform self help tasks, tasks that are associated with employment activities, or tasks that allow an individual to more fully enjoy and participate in leisure time activities. Occupational therapy is used in retraining individuals after illnesses and accidents, as well as providing ongoing help to persons with more permanent disabilities from stroke, paralysis or deterioration from degenerative diseases such as arthritis or multiple sclerosis.

PERSONAL CARE ATTENDANT --

Non-medical persons who are usually paid (but can be unpaid) who help a disabled persons perform activities of daily living including: bathing, dressing, meal preparation, feeding, paying bills, and transportation.

PHYSICAL THERAPIST --

Medical person who is concerned with the treatment of musculoskeletal disorders with physical agents and methods -- such as massage, manipulation, therapeutic exercises, cold, heat, hydrotherapy, electric stimulation, and light -- to assist in rehabilitating patients and in restoring normal function after an illness or injury.

RESPIRATORY THERAPIST --

Respiratory therapists (RT) specialize in the assessment and treatment of breathing disorders resulting from chronic lung problems (e.g. asthma, bronchitis, emphysema, COPD), as well as breathing disorders stemming from other conditions such as heart attack, stroke, or trauma. Respiratory therapists are specialists in airway management, mechanical ventilation, acid/base balance, and critical care medicine.

SOCIAL WORKER --

A person who assists patients and their families in handling social, environmental, and emotional problems associated with illness or injury. Can include social work specialists, such as a medical or psychiatric social worker.

SPEECH THERAPIST --

A medical person trained in the application and use of techniques aimed at improving language and speech disorders.

PV01

PERSON --

The provider works individually, that is, the provider is not associated with any group practice, HMO, clinic, etc.

FACILITY --

The provider is either a place, such as a hospital, clinic, emergency room, laboratory, etc., or the provider is an individual who is associated with a group practice, HMO, clinic, etc.

This category does not include individual providers or facilities all working at the same location, such as a 'medical building' which houses several INDEPENDENTLY functioning medical offices, laboratories, doctors, etc.

HS02

EMERGENCY ROOM --

A medical department at a hospital that is open 24 hours a day where no appointment is necessary in order to receive care. Medical care may be administered by a physician, nurse, physician assistant, or other medical provider. Do NOT include 'urgent care centers', which are owned by, or affiliated with a hospital. Visits made to that type of facility should be coded as an outpatient department visit.

ED07

HOSPITAL STAY --

A visit to a hospital where a person is admitted to the hospital. While most in-patient stays are 24-hours or longer, a person need not have stayed overnight to have been "admitted" to a hospital; it is possible to be admitted and discharged on the same day.

EMERGENCY ROOM VISIT --

Any visit made during the person's reference period to a hospital emergency room.

EMERGENCY ROOM -

A medical department at a hospital that is open 24 hours a day where no appointment is necessary in order to receive care. Medical care may be administered by a physician, nurse, physician assistant, or other medical provider. Do NOT include 'urgent care centers', which are owned by, or affiliated with a hospital. Visits made to that type of facility should be coded as an outpatient department visit.

OUTPATIENT DEPARTMENT VISIT --

Any visit made during the person's reference period to a hospital outpatient department.

OUTPATIENT DEPARTMENT -

A unit of a hospital, a facility, or 'urgent care center' owned by or affiliated with a hospital. The outpatient department provides health and medical services to individuals who do not require hospitalization overnight and may also provide general primary care.

Do NOT include 'urgent care centers' which are not owned by, or affiliated with a hospital. Urgent care centers which are NOT affiliated with or owned by a hospital should be coded as a Medical Provider visit. Include visits made to outpatient departments for medical tests only.

Examples of outpatient departments include:

- well-baby clinics/pediatric OPD;
- obesity clinics;
- eye, ear, nose, and throat clinics;
- cardiology clinic;
- internal medicine department;
- family planning clinics;
- alcohol and drug abuse clinics;
- physical therapy clinics; and
- radiation therapy clinics.

MEDICAL PROVIDER VISIT --

Any visit made during the person's reference period to a specific setting of care where a medical provider was seen. Settings of care can include: a private doctor's office, a clinic, a health maintenance organization (HMO), an independent laboratory or X-ray facility or an 'urgent care center' not owned by or affiliated with a hospital.

MEDICAL PROVIDER - A doctor, nurse, or any other medical person or place that delivers medical or health related care.

DENTAL CARE VISIT --

Any visit made during the person's reference period to a dental care provider for the purpose of dental care.

DENTAL CARE PROVIDER - Medical persons whose primary occupation is caring for teeth, gums, and jaws. Dental care includes general work such as fillings, cleaning, extractions, and also specialized work such as root canals, fittings for braces, etc.

HS05

OPERATION OR SURGICAL PROCEDURE --

Choose this category only if the surgical procedure best describes the reason for the hospital admission. A woman who gave birth by cesarean section should not be coded under operation or surgical procedure because her primary purpose for entering the hospital was to give birth. An operation or surgical procedure includes any procedure which involves cutting into the skin, including stitching of cuts and wounds. For this question, surgery includes the following:

- cutting of tissue or scraping of internal parts as in curettage of the uterus (e.g., abortions);
- insertion of instruments in body openings for internal examination and treatment such as bronchoscopy, proctoscopy, cystoscopy, cardiac catheterization (also called angiography), laparoscopy, and introduction of tubes for drainage;

- diagnostic biopsy including aspiration or needle biopsies;
and
- dental surgery.

Injections, transfusions and routine blood tests are not considered surgery here, nor are pumping or washing out the stomach or bowels.

TREATMENT OR THERAPY FOR A MEDICAL CONDITION, NOT INCLUDING SURGERY --

The application of non-surgical remedies to counteract the effects of a disease or health care problem. Some examples are therapeutic radiation and chemotherapy. Therapy for MENTAL health problems should not be included.

DIAGNOSTIC TESTS ONLY --

This category will be chosen if the main reason for the hospital stay is for the administration of examinations or tests to detect the presence of a disease or physical problem. Exclude hospital stays resulting from the treatment of a disease or physical problem.

GIVE BIRTH TO A BABY - NORMAL OR CESAREAN SECTION (MOTHER) --

Hospital stay due to the emergence and separation of offspring from the body of the mother. Includes normal childbirth (delivery of baby through the birth canal) and cesarean section (surgical operation for delivering a baby by cutting through the mother's abdominal and uterine walls).

TO BE BORN (BABY) --

This category is for the newborn BABY'S hospital stay.

PREGNANCY RELATED COMPLICATIONS --

Code this category only to capture a hospital stay due to a reason related to a woman's pregnancy, where the result was NOT a live birth. This could include reasons such as stillbirth, miscarriage, placenta previa, or other pregnancy-related complications that resulted in a hospital-stay admission. **If the result was a live birth, regardless of any related complication, use the code 'GIVE BIRTH TO A BABY'**

HS06

OPERATIONS/SURGICAL PROCEDURES --

Any procedure which involves cutting into the skin, including stitching of cuts and wounds. For this question, surgery includes the following:

- cutting of tissue or scraping of internal parts as in curettage of the uterus (e.g., abortions);
- insertion of instruments in body openings for internal examination and treatment such as bronchoscopy,

proctoscopy, cystoscopy, cardiac catheterization (also called angiography), laparoscopy, and introduction of tubes for drainage;

- diagnostic biopsy including aspiration or needle biopsies; and
- dental surgery.

Injections, transfusions and routine blood tests are NOT considered surgery here, nor are pumping or washing out the stomach or bowels.

HS06AA

ICU --

An intensive care unit (ICU) is a specialized department used in many hospitals that provides close monitoring nursing and medical care for critically ill patients. They are characterized by continuous nursing and medical supervision and by the use of sophisticated monitoring devices and resuscitative equipment. Include any unit designated as intensive care such as:

- Critical care unit (CCU)
- Neonatal intensive-care unit (NICU)
- Pediatric intensive-care unit (PICU)
- Medical intensive-care unit (MICU)
- Surgical intensive-care unit (SICU)
- Burn or Trauma Intensive care Unit (TICU)

HS06A

VAGINAL DELIVERY --

Delivery of an infant through the normal openings of the uterus and vagina.

CAESAREAN SECTION --

Surgical operation for delivering a baby by cutting through the mother's abdominal and uterine walls.

HS08

ER08

OP14

MV14

DN05

PRESCRIBED MEDICINE --

Prescribed medicines are those ordered by a physician or other authorized medical person through a written or verbal prescription for a pharmacist to fill. Prescription medicines can also be given by a medical provider directly to a patient to take home, such as free samples. (Free samples are collected separately in the Prescribed Medicine Section at question PM06.)

Prescription medicines do NOT include:

- medicines administered to the patient DURING THE EVENT as part of the treatment (such as an antibiotic shot for an infection, a flu shot, or a medicine taken orally).
- diaphragms and IUDs (Intra-Uterine Devices);
- prescriptions for eye glasses or contact lenses, or
- over-the-counter medications that do not have a written prescription from a doctor.

Some state laws require prescriptions for certain over-the-counter medicines. Sometimes physicians write a prescription for over-the-counter drugs such as aspirin. Therefore, consider any medicine a prescribed medicine if the respondent reports it as prescribed. If it is an over-the-counter drug, however, the prescription must be a written one to be filled by a pharmacist, not just an oral instruction. If in doubt, probe whether the patient got a WRITTEN prescription to fill at a pharmacy. If there is still any doubt, report the medicine as a prescription medicine.

OP04
MV03
MV06

MEDICAL DOCTOR --

Include both doctors of medicine (M.D.) and doctors of osteopathy (D.O.). Specific examples of physicians include:

allergists	obstetricians
anesthesiologists	ophthalmologists
cardiologists	orthopedists
dermatologists	otolaryngologists
endocrinologists	(ear, nose, & throat doctor)
family practice physicians	pediatricians
gastroenterologists	psychiatrists
general physicians	physiatrist (rehab medicine)
geriatricians	radiologists
gynecologists	surgeons (any)
internists	urologists
neurologists	

Types of providers NOT to be counted as medical doctors are chiropractors, dentists, nurses, optometrists, paramedics, podiatrists, psychologists.

ER02

The purpose of this question is to identify the BEST category of care the person received during this visit to the emergency room. Code only one response.

DIAGNOSIS OR TREATMENT FOR A HEALTH PROBLEM --

DIAGNOSIS is an examination or test to detect the presence of a disease or other physical problem. TREATMENT is any procedure to counteract the effects of a disease or health care problem.

An example of a visit for 'diagnosis and treatment' is a person who had a fever and a sore throat: the provider DIAGNOSED the condition as the flu, and recommended TREATMENT of bed rest and aspirin.

Even if the provider determines the person does NOT have a health condition or if the provider is unable to determine what the problem is, the visit was for purposes of diagnosis regardless of the outcome of the examination.

If the only care received during the visit was tests such as blood work or x-rays, consider this 'diagnosis or treatment for a health problem' even if there is no known condition. For example, if a woman has a baseline mammogram, this is considered 'diagnosis' even if no condition is suspected or discovered.

EMERGENCY (E.G., ACCIDENT OR INJURY) --

Refers to immediate care intended to assess and address an acute problem that has the patient in extreme discomfort or threatens his/her life.

PSYCHOTHERAPY OR MENTAL HEALTH COUNSELING --

A treatment technique for certain forms of mental disorders relying principally on verbal communications between the mental health professional and the patient. Can be individual, family, and/or group therapies. Include care provided by any type of health professional so long as treatment is for MENTAL health. Does NOT include visits with clergy to discuss personal problems. Any other professional mental health therapist such as a psychiatrist, psychologist, counselor, social worker, etc. would be included.

FOLLOW-UP OR POST-OPERATIVE VISIT --

Includes visits to check on patient's progress after some type of surgery or other medical treatment. This includes visits to verify that patient has fully recovered, to remove stitches or a cast, or to adjust medications.

VISION EXAM --

A test of the patient's eyesight, either to determine whether any correction by glasses/contact lenses is needed, or to determine if a different degree of correction is needed.

PREGNANCY RELATED (INCLUDING PRENATAL CARE AND DELIVERY)--

Consultations and examinations relating to pregnancy, i.e., prenatal (or before delivery) and postnatal (or after delivery) care of the mother up to six weeks after childbirth.

This category also includes normal childbirth (delivery of the baby through the birth canal) and cesarean section (surgical operation for delivering a baby by cutting through the mother's abdominal and uterine walls).

ER05
ER05OV1
OP11
OP11OV1
MV11
MV11OV1

LABORATORY TESTS --

The non-invasive collection of samples of blood, urine, or any other body fluids, tissues, or other substances to be examined by a medical person in order to get more information about the patient's condition. This includes the collection of stool samples, or cells from smears like Pap tests. Test should be coded here if the specimen was collected during the particular event, regardless of where or when the specimens were examined.

THROAT SWAB --

A doctor or other health professional wipes the back of the patient's throat with a long cotton swab. The swab is then tested in the office or sent to an outside laboratory. This may also be known as a throat culture or strep screen.

SONOGRAM OR ULTRASOUND --

A photographic image of an internal region of the body obtained from the reflection patterns of high frequency sound waves.

X-RAYS --

A photographic image of a person's skeleton and internal organs obtained by exposing the patient to a limited amount of radiation. 'X-ray' here means simple x-rays which do not involve ingestion of any substance or any more complicated imaging equipment. This process is used to diagnose broken bones, lung disease, etc. This category includes barium x-rays.

MAMMOGRAM --

An x-ray photograph of the breasts, usually used to detect breast cancer.

MRI OR CAT SCAN --

An MRI (magnetic resonance imaging) is a non-invasive process that generates electronic images of specific atoms and molecular structures inside the human body such as cells, tissues, and organs. The process uses a magnetic field outside the body to generate images.

A CAT SCAN is a computerized x-ray image of the internal body structures, displayable in various cross-sections. This is also referred to as CT imaging.

EKG OR ECG --

These are both abbreviations for electrocardiogram which is a graphic record of the electrical activity of the heart.

EEG --

EEG is an abbreviation for electroencephalogram which is a graphic record of the electrical activity of the brain.

VACCINATION --

A shot or oral medication given to the patient to prevent him/her from contracting a communicable disease.

ANESTHESIA --

The loss of sensation induced by an anesthetic and limited to a specific area (local anesthesia) or involving a loss of consciousness (general anesthesia).

OTHER DIAGNOSTIC TEST --

Include any other non-invasive test performed with chemicals or machines on body tissue or fluid samples and any test of range of motion, sensitivity, etc. performed by a medical person directly on a patient.

ER06
OP12
MV12
FF06
FF11

SURGICAL PROCEDURE --

Any procedure which involves cutting into the skin, including stitching of cuts and wounds. For this question, surgery includes the following:

- cutting of tissue or scraping of internal parts as in curettage of the uterus (e.g., abortions);
- insertion of instruments in body openings for internal examination and treatment such as bronchoscopy, proctoscopy, cystoscopy, cardiac catheterization (also called angiography), laparoscopy, and introduction of tubes for drainage;
- diagnostic biopsy including aspiration or needle biopsies; and
- dental surgery.

Injections, transfusions, and routine blood tests are NOT considered surgery here, nor are pumping or washing out the stomach or bowels.

OP05

CHIROPRACTOR --

Medical persons who practice a system of medicine based on the principles that the nervous system largely determines the state of health and that disease results from nervous system malfunctioning. Treatment consists primarily of the adjustment and manipulation of parts of the body, especially the spinal column.

DENTIST/DENTAL CARE PERSON --

Medical persons whose primary occupation is caring for teeth, gums, and jaws. Dental care includes general work such as fillings, cleaning, extractions, and also specialized work such as root canals, fittings for braces, etc.

MIDWIFE --

A female who practices the art of aiding in the delivery of babies.

NURSE/NURSE PRACTITIONER --

The term NURSE includes several types of nursing specialists, such as registered nurse (RN), licensed practical nurse (LPN), nurse's aide, occupational health nurse, community health nurse, or public health nurse (PHN).

A NURSE PRACTITIONER is a registered nurse (RN) who has completed additional training beyond basic nursing education. They have qualifications which permit them to carry out expanded health care evaluation and decision-making regarding patient care.

OPTOMETRIST --

A medical person who examines the eyes and vision system for visual defects, diagnoses eye impairments, prescribes corrective lenses, and provides other types of treatment. Not to be confused with medical doctors who specialize in treating eye diseases, such as ophthalmologists.

PODIATRIST --

A podiatrist (DPM) (sometimes referred to as a 'foot doctor'), is a medical person who deals with examination, diagnosis, treatment, and prevention of diseases, conditions, and malfunctions affecting the human foot and its related structures.

PHYSICIAN'S ASSISTANT --

A Physician's Assistant (PA) is a medical person who provides health care services with the direction and supervision of a doctor of medicine (MD) or osteopathic physician (DO). Physician's Assistants train for several years in order to earn the certification to perform diagnostic, therapeutic, preventive, and health maintenance services. Not to be confused with non-medical persons who also 'assist' the physician.

PHYSICAL THERAPIST --

Medical person who is concerned with the treatment of musculoskeletal disorders with physical agents and methods -- such as massage, manipulation, therapeutic exercises, cold, heat, hydrotherapy, electric stimulation, and light -- to assist in rehabilitating patients and in restoring normal function after an illness or injury.

OCCUPATIONAL THERAPIST --

Medical persons who are concerned with improving the person's ability to perform self help tasks, tasks that are associated with employment activities, or tasks that allow an individual to more fully enjoy and participate in leisure time activities. Occupational therapy is used in retraining individuals after illnesses and accidents, as well as providing ongoing help to persons with more permanent disabilities from stroke, paralysis or deterioration from degenerative diseases such as arthritis or multiple sclerosis.

PSYCHOLOGIST --

A non-physician who specializes in the counseling and testing of persons with mental, addictive, or emotional disorders.

SOCIAL WORKER --

A person who assists patients and their families in handling social, environmental, and emotional problems associated with illness or injury. Can include social work specialists, such as a medical or psychiatric social worker.

TECHNICIAN --

A person with the knowledge and skill to carry out a specific technical medical procedure, such as an x-ray technician.

ACUPUNCTURIST --

Usually a medical person who uses a technique for relieving pain, treating medical conditions, inducing regional anesthesia, or improving general well-being, in which thin needles are inserted into the body at specific points. Acupuncture can also be practiced by medical doctors (MD's).

MASSAGE THERAPIST --

A person who treats a health problem through manipulation, methodical pressure, friction or kneading of the body.

HOMEOPATHIC/NATUROPATHIC/HERBALIST/OTHER ALTERNATIVE/COMPLEMENTARY CARE PROVIDER --

HOMEOPATHIC - A person who treats health problems based on a system of medicine based on the principle of 'like cures like.' Substances that cause the symptoms of a particular health problem are used in very small doses to treat the problem.

NATUROPATHIC - A person who treats health problems based on the curative abilities of nature's elements, such as sun, water, air and earth. Many naturopathic physicians also use modern medical methods in conjunction with naturopathic therapies.

HERBALIST - A person who uses plant-based substances to prevent or treat a health problem or to maintain good health. Herbal remedies are available in many forms, including pills, liquids and crèmes.

ALTERNATIVE/COMPLEMENTARY CARE - Approaches to health care that are different from those typically practiced by medical doctors in the U.S. Included in this type of care are acupuncture, nutritional advice or lifestyle diets, massage therapy, herbal remedies, bio-feedback training, meditation, imagery, or relaxation techniques, homeopathic treatment, spiritual healing or prayer, hypnosis, and traditional medicine, such as Chinese, Ayurvedic, American Indian, etc.

OP07
MV07

GENERAL CHECKUP --

A visit to determine the general state of a person's health. Includes physical examinations required to obtain employment, for college entrance, to obtain insurance, periodic (yearly) general checkups, visits to the well-baby clinic, etc. NOT included are visits for a checkup or examination for a SPECIFIC CONDITION such as TB or a heart condition.

DIAGNOSIS OR TREATMENT FOR A HEALTH PROBLEM --

DIAGNOSIS is an examination or test to detect the presence of a disease or other physical problem. TREATMENT is any procedure to counteract the effects of a disease or health care problem.

An example of a visit for 'diagnosis and treatment' is a person who had a fever and a sore throat: the provider DIAGNOSED the condition as the flu, and recommended TREATMENT of bed rest and aspirin.

Even if the provider determines a person in fact does NOT have a health condition, the visit was for purposes of diagnosis regardless of the outcome of the examination.

If the only care received during the visit was tests such as blood work or x-rays, consider this 'diagnosis or treatment for a health problem' even if there is no known condition. For example, if a woman has a baseline mammogram, this is considered 'diagnosis' even if no condition is suspected or discovered.

EMERGENCY (E.G., ACCIDENT OR INJURY) --

Refers to immediate care intended to assess and address an acute problem that has the patient in extreme discomfort or threatens his/her life.

PSYCHOTHERAPY OR MENTAL HEALTH COUNSELING --

A treatment technique for certain forms of mental disorders relying principally on verbal communications between the mental health professional and the patient. Can be individual, family, and/or group therapies. Include care provided by any type of health professional so long as treatment is for MENTAL health. Does NOT include visits with clergy to discuss personal problems. Any other professional mental health therapist such as a psychiatrist, psychologist, counselor, social worker, etc. would be included.

FOLLOW-UP OR POST-OPERATIVE VISIT --

Includes visits to check on patient's progress after some type of surgery or other medical treatment. This includes visits to verify that patient has fully recovered, to remove stitches or a cast, or to adjust medications.

IMMUNIZATIONS OR SHOTS --

IMMUNIZATIONS are oral medications or shots given to the patient to prevent the patient from contracting a communicable disease.

SHOTS are hypodermic injections. This category includes allergy shots.

VISION EXAM --

A test of the patient's eyesight, either to determine whether any correction by glasses/contact lenses is needed, or to determine if a different degree of correction is needed.

PREGNANCY RELATED (INCLUDING PRENATAL CARE AND DELIVERY)--

Consultations and examinations relating to pregnancy, i.e., prenatal (or before delivery) and postnatal (or after delivery) care of the mother up to six weeks after childbirth.

This category also includes normal childbirth (delivery of the baby through the birth canal) and cesarean section (surgical operation for delivering a baby by cutting through the mother's abdominal and uterine walls).

WELL CHILD EXAM --

One of a series of routine examinations of an infant given to monitor the infant's growth and development. If an infant goes only for an immunization, code as 'immunization or shots'. If the immunization is part of a well child visit, code as 'well child exam'. This term applies not just to infants, but toddlers, preschoolers and often older children.

OP19
MV16

The purpose of this question is to identify any 'repeat visits' that were made, that is where the person visited the same provider more than once for the same condition.

REPEAT VISITS --

Any visit to the same medical provider for the same condition and services with the same charge as another visit.

OP20
MV17

COST THE SAME AMOUNT --

Sometimes the respondent will not know the actual charge for any (or some) of the visits, but always makes the same copayment for each visit. As long as the visits were for the same condition(s) and the same services were received at each visit, code this question as 'YES' (visits were all for the same amount).

MV04

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SOCIAL WORKER --

A person who assists patients and their families in handling social, environmental, and emotional problems associated with illness or injury. Can include social work specialists, such as a medical or psychiatric social worker.

TECHNICIAN --

A person with the knowledge and skill to carry out a specific technical medical procedure, such as an x-ray technician.

RECEPTIONIST, CLERK, SECRETARY --

A person who assists a medical person in performing clerical tasks, such as scheduling appointments, filing and maintaining medical records, billing, and answering the telephone.

ACUPUNCTURIST --

Usually a medical person who uses a technique for relieving pain, treating medical conditions, inducing regional anesthesia, or improving general well-being, in which thin needles are inserted into the body at specific points. Acupuncture can also be practiced by medical doctors (MD's).

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MV13

ARTHROSCOPIC (VISUALIZATION OF JOINTS) SURGERY --

Surgery involving arthroscopy. Arthroscopy is direct joint visualization by means of an arthroscope.

CLEANING OR MEDICAL TREATMENT OF WOUND, INFECTION, OR BURN --
Removal of foreign material and dead or damaged tissue from
wounds, infections, or burns.

REMOVAL OF DISEASED TISSUE (EXCISION OF LESION) --
Cutting away or taking out a circumscribed area of
pathologically altered tissue, an injury or wound, or a single
infected patch in a skin disease.

STITCHES (WOUND SUTURE) --
Operation or uniting parts by stitching them together. Suture
is the thread for sewing up wounds or surgical incisions.
Stitches fashioned from the thread are also called sutures.
The stitching process is known as suturing.

EAR TUBES (TYMPANOSTOMY TUBES) --
Tubes placed through the ear drum (tympanic membrane) to allow
ventilation of the middle ear as part of the treatment of ear
infections (otitis media with effusion).

DN03

GENERAL DENTIST --
A general dentist conducts routine examinations, fills cavities,
extracts teeth (except for wisdom teeth), and performs services
not done by the specialists listed in the other parts of this
question.

DENTAL HYGIENIST --
A person who is licensed to give certain dental services under
the supervision of a dentist. These services include: teeth
cleaning, x-rays, applying medications, and educating in dental
matters.

DENTAL TECHNICIAN --
A person who works in a dental laboratory and prepares dentures
and other appliances such as orthodontic devices and crowns to
fit dental prescriptions.

DENTAL SURGEON/ORAL SURGEON --
A dental surgeon is a specialist who deals with diseases,
injuries, and defects of the mouth and jaw through invasive
procedures. Includes specialties like endodontists,
prosthodontists and orthodontists.

An oral and maxillofacial surgeon (OMFS) is a surgical specialty
devoted to the well-defined anatomical region of the mouth, jaws
and the face as well as associated structures. Most oral surgeons
are initially qualified in dentistry and have undergone a further
4-6 years of specialty surgical training.

ORTHODONTIST --
A dental specialist who deals with preventing and correcting
irregular teeth through devices such as braces and retainers.

ENDODONTIST --

A dental specialist who performs root canal work and otherwise deals with diseases of the dental pulp and roots.

PERIODONTIST --

A dental specialist who deals with diseases in the bone, connective tissue, and gums surrounding and supporting the teeth.

DN04
DN04OV

DIAGNOSTIC OR PREVENTATIVE:

GENERAL EXAM, CHECKUP OR CONSULTATION --

Refers to the activity performed by either a dentist or a dental hygienist to determine whether cavities or gum disease have developed, or whether examination by a specialist may be necessary.

CLEANING, PROPHYLAXIS, OR POLISHING --

Refers to activities performed by a dentist or dental hygienist to maintain healthy teeth and prevent cavities. Cleaning includes scraping tartar deposits off teeth, both above and below the gumline.

X-RAYS, RADIOGRAPHS AND BITEWINGS --

All are different names for photographic images of the teeth obtained through the use of small amounts of radiation. These images are used to discover hidden cavities and flaws in teeth.

FLUORIDE TREATMENT --

The application of a solution containing the chemical fluoride, which is intended to make the teeth more resistant to tooth decay.

SEALANT (PLASTIC COATINGS ON BACK TEETH) --

The application of a material to close fissures, grooves, or pits on the chewing surfaces of back teeth.

RESTORATIVE OR ENDODONTIC:

FILLINGS --

A substance of plastic, amalgam, gold, etc. which is used to close a cavity in a decayed tooth. The substance is placed directly into the cleaned cavity and then shaped to match the rest of the tooth.

INLAYS --

A filling of metal, porcelain, or the like which is first shaped to fit a cavity and then cemented into it. The inlay is prepared outside of the patient's mouth.

CROWNS OR CAPS --

An artificial substitute for the part of a tooth above the gumline. Can be made of gold, porcelain, etc.

ROOT CANAL --

A procedure in which the pulp of an injured or dead tooth is removed and replaced with a filling in order to save the tooth.

PERIODONTIC (GUM TREATMENT):

PERIODONTAL SCALING, ROOT PLANNING, OR GUM SURGERY --

Procedures or surgeries that treat diseases in the bone, connective tissue, and gums surrounding and supporting the teeth.

PERIODONTAL RECALL VISIT (PERIODIC OR REGULAR) --

Refers to periodontal treatment that occurs on a periodic or regular basis.

ORAL SURGERY:

EXTRACTION, TOOTH PULLED --

Removal of a tooth; includes both adult and baby teeth.

IMPLANTS --

Metal posts permanently imbedded in the jawbone to which false teeth are attached.

ABSCESS OR INFECTION TREATMENT --

Refers to care for a localized area of the gum surrounding a tooth.

OTHER ORAL SURGERY --

Includes surgical procedures on the jaw.

PROSTHETICS:

FIXED BRIDGES --

A fixed replacement for one or several natural teeth, attached at each end to a natural tooth.

DENTURES OR REMOVABLE PARTIAL DENTURES --

False teeth that are removable from the mouth.

RELINING OR REPAIR OF BRIDGES OR DENTURES --

Includes replacing false teeth and repairing the supporting structure for false teeth, including the portion covering the gums.

ORTHODONTICS:

ORTHODONTIA, BRACES, OR RETAINERS --

Refers to services and appliances fitted to some or all teeth to correct irregularly spaced teeth.

ADDITIONAL PROCEDURES:

BONDING, WHITENING, OR BLEACHING --

Processes used to improve the appearance of teeth by either using chemical to whiten them or by applying an overlay to cover stained or discolored teeth.

TREATMENT FOR TMD (TEMPOROMANDIBULAR DISORDERS) OR TMJ (TEMPOROMANDIBULAR JOINT) --

TMD refers to various problems associated with the TMJ, which connects the lower jaw to the skull. The major symptom is pain in the jaws, face, head or neck, which may be associated with dislocations, difficulty opening the mouth and decreased jaw function. Numerous therapies may be performed. Most are conservative (moist heat, massage, mouth guards, medication, bite adjustments). Some persons receive extensive reconstruction of teeth with crowns, or surgery on the jaw and jaw point.

HH01

CERTIFIED NURSING ASSISTANT (CNA) --

Persons who provide general nursing care to patients at home. These person must have received training in order to be certified to perform these duties. Duties may include things such as administering prescribed medicines and treatment in accordance with approved nursing techniques. They may record significant conditions and reactions and notify their supervisor of the patient's condition and reaction to drugs, treatments, and significant incidents. They may also take the patient's temperature, pulse, blood pressure, and other vital signs to detect deviations from normal.

COMPANION --

Persons who care for elderly, disabled, or convalescent persons by attending to the patient's personal needs, reading aloud, playing cards, or other games to entertain the RU member because of the RU member's health problem.

DIETITIAN/NUTRITIONIST --

Persons concerned with the application of the principles of nutrition to plan and supervise the preparation and serving of meals. Includes planning menus and diets for special nutritional requirements; participating in research; or instructing in the field of nutrition.

HOME HEALTH/HOME CARE AIDE --

A health worker who provides personal care and home management services to allow patients to live in their own homes. A home health aide may work under the supervision of a physician or registered nurse and may help patients bathe, exercise, and dress. He or she may check the patient's temperature, blood pressure, and pulse and respiration rates; give massages and help give medications.

HOSPICE WORKER --

A person who provides health and personal care in the home to persons who are dying. They may administer medical treatments, help people bathe, dress, and eat, or help them manage their household affairs.

HOMEMAKER --

Persons who advise or help the RU member in dealing with problems, such as nutrition, cleanliness, and household utilities because of his or her health problem.

I.V./INFUSION THERAPIST --

A person who administers, monitors, and maintains equipment which is used to provide medication or nutrition intravenously (placed in a person's body by inserting a needle into a vein). The needle is attached to a tube and bag, and is left in place for an extended period of time. The bag is replaced when empty.

MEDICAL DOCTOR --

Include both doctors of medicine (M.D.) and doctors of osteopathy (D.O.). Specific examples of physicians include:

allergists	obstetricians
anesthesiologists	ophthalmologists
cardiologists	orthopedists
dermatologists	otolaryngologists
endocrinologists	(ear, nose, & throat doctor)
family practice physicians	pediatricians
gastroenterologists	psychiatrists
general physicians	physiatrist (rehab medicine)
geriatricians	radiologists
gynecologists	surgeons (any)
internists	urologists
neurologists	

Types of providers NOT to be counted as medical doctors are chiropractors, dentists, nurses, optometrists, paramedics, podiatrists, psychologists.

NURSE --

Includes several types of nursing specialists, such as registered nurse (RN), licensed practical nurse (LPN), nurse's aide, occupational health nurse, community health nurse, or public health nurse (PHN).

NURSE PRACTITIONER --

A registered nurse (RN) who has completed additional training beyond basic nursing education. They have qualifications which permit them to carry out expanded health care evaluation and decision-making regarding patient care.

NURSE'S AIDE --

Persons who may perform any combination of tasks, and may be directed by nursing and medical staff, to care for patients at home. Their duties may include bathing patients; giving alcohol rubs; measuring and recording the intake and output of liquids; taking and recording temperature, pulse and respiration rates; examining equipment to detect maintenance needs and notifying the supervisor of these needs.

OCCUPATIONAL THERAPIST --

Medical persons who are concerned with improving the person's ability to perform self help tasks, tasks that are associated with employment activities, or tasks that allow an individual to more fully enjoy and participate in leisure time activities. Occupational therapy is used in retraining individuals after illnesses and accidents, as well as providing ongoing help to persons with more permanent disabilities from stroke, paralysis or deterioration from degenerative diseases such as arthritis or multiple sclerosis.

PERSONAL CARE ATTENDANT --

Non-medical persons who are usually paid (but can be unpaid) who help a disabled persons perform activities of daily living including: bathing, dressing, meal preparation, feeding, paying bills, and transportation.

PHYSICAL THERAPIST --

Medical person who is concerned with the treatment of musculoskeletal disorders with physical agents and methods -- such as massage, manipulation, therapeutic exercises, cold, heat, hydrotherapy, electric stimulation, and light -- to assist in rehabilitating patients and in restoring normal function after an illness or injury.

RESPIRATORY THERAPIST --

Respiratory therapists (RT) specialize in the assessment and treatment of breathing disorders resulting from chronic lung problems (e.g. asthma, bronchitis, emphysema, COPD), as well as breathing disorders stemming from other conditions such as heart attack, stroke, or trauma. Respiratory therapists are specialists in airway management, mechanical ventilation, acid/base balance, and critical care medicine.

SOCIAL WORKER --

A person who assists patients and their families in handling social, environmental, and emotional problems associated with illness or injury. Can include social work specialists, such as a medical or psychiatric social worker.

SPEECH THERAPIST --

A medical person trained in the application and use of techniques aimed at improving language and speech disorders.

HH03

HOSPITALIZATION --

A medical event when a person is admitted to a hospital. Note that a person need not have stayed overnight to be considered 'hospitalized' or 'admitted' to a hospital. A person may be admitted and discharged on the same day.

HH04

HEALTH PROBLEM --

Diseases or ailments. A disease is an illness or disorder of the function of the body or of certain tissues, organs, or systems, which is characterized by an identifiable group of symptoms. An ailment is a mild mental or physical disorder. An example of a health problem is influenza; some of its symptoms are fever, chills, and dizziness. Health problems may be either physical or mental.

Be sure to record health problems only; do not record symptoms here unless the respondent cannot give a condition name.

HH06

MEDICAL TREATMENT EXAMPLES --

- Changing bandages
- Wound care
- Giving medication
- Taking blood pressure
- Giving shots or injections
- Other medical treatments

MEDICAL THERAPY EXAMPLES --

- | | |
|-----------------|----------------------------|
| - Physical | - Art |
| - Occupational | - Orientation and Mobility |
| - Infusion | - Music |
| - Respiratory | - Dance |
| - Speech | - Corrective |
| - Mental Health | - Industrial |
| - Horticultural | |

PM04

Make sure that the prescribed medicine reported by the respondent for this question has not already been reported in a prior question.

PRESCRIPTIONS --

Prescribed medicines are those ordered by a physician or other authorized medical person through a written or verbal prescription for a pharmacist to fill. Prescription medicines can also be given by a medical provider directly to a patient to take home, such as free samples. (Free samples are collected separately in the Prescribed Medicine Section at question PM06.)

Prescription medicines do NOT include:

- medicines administered to the patient DURING THE EVENT as part of the treatment (such as an antibiotic shot for an infection, a flu shot, or a medicine taken orally).
- diaphragms and IUDs (Intra-Uterine Devices);
- prescriptions for eye glasses or contact lenses, or
- over-the-counter medications that do not have a written prescription from a doctor.

Some state laws require prescriptions for certain over-the-counter medicines. Sometimes physicians write a prescription for over-the-counter drugs such as aspirin. Therefore, consider any medicine a prescribed medicine if the respondent reports it as prescribed. If it is an over-the-counter drug, however, the prescription must be a written one to be filled by a pharmacist, not just an oral instruction. If in doubt, probe whether the patient got a WRITTEN prescription to fill at a pharmacy. If there is still any doubt, report the medicine as a prescription medicine.

REFILLS --

A medicine is refilled for the person whose name appears on the prescription label. Usually, prescriptions have specified limits to the number of times they can be refilled.

Even if the medicine ends up being taken by someone else, record only the person the prescription was written for.

PM06

FREE SAMPLES --

Limited amounts of a prescription medication which are given out by doctors to patients free of charge, sometimes in lieu of a written or verbal prescription.

PM16

MAIL-ORDER --

Refers to a service that delivers prescriptions through either the mail, a rapid mail service such as Federal Express, or through United Parcel Service (UPS).

IN ANOTHER STORE --

Pharmacies that are located within another store, such as a department or grocery store. Pharmacies located within a K-mart or Wal-mart are common examples of this type of pharmacy.

IN AN HMO/CLINIC/HOSPITAL --

Pharmacies that are located within an HMO, clinic, or hospital facility.

DRUG STORE --

An independent or chain retail store where the primary business is the service provided by the pharmacy.

ON-LINE PHARMACY --

An independent or chain retail store which fills prescriptions over the internet. A person accesses and places their order with this type of pharmacy through a website.

CP01A

HEALTH INSURANCE OR ANOTHER SOURCE OF COVERAGE --

Any individual, company, or organization, besides the person or family, that made any payments to the pharmacy for the prescription medicines received. This includes: health insurance companies, HMOs, Medicare, Medicaid, SCHIP (State Children's Health Insurance Program) or other types of public health programs. This also includes other types of coverage which may sometimes pay for prescription medicines, such as employers, car or home owner's insurance, worker's compensation policies, etc.

CP01B

SOURCE --

Any individual, company, or organization, besides the person or family, that made any payments to the pharmacy for the prescription medicines received. This includes health insurance companies, HMOs, employers, car or home owner's insurance, worker's compensation policies, Medicare, Medicaid, SCHIP (State Children's Health Insurance Program) or other types of public programs, etc.

For this question please enter the USUAL source of payment for the person's prescription medicines during the reference period. For example, if the person obtained three prescribed medicines, and two were paid for by their regular insurance company and one was paid for by their car insurance policy, their USUAL source of payment for their prescribed medicines would be their regular insurance company.

CP01

FAMILY SENDS IN CLAIM FORMS --

The RU member or family must pay the full amount of the prescription 'up-front' to the pharmacy or prescription mail-order firm. The family later completes a claim form so his or her insurance company will reimburse all or a portion of the prescription cost.

PHARMACY AUTOMATICALLY FILES CLAIMS --

The RU member of family has some type of insurance that will cover the cost of prescription drugs. The family pays only a portion of the full cost of the prescription or does not have to pay any portion of the cost. The pharmacy will then file the insurance claims for the family and is reimbursed for the remainder of the prescription charge directly from the insurance company.

NOT EITHER TYPE OF SITUATION --

This includes all other types of payment arrangements not described above. For example, the person must pay the full amount of the prescription with no reimbursement from any insurer, you would code this category.

CP02
CP02OV

COPAYMENT --

A fixed sum that a person pays for health services, regardless of the actual charge (the insurer pays the rest of the actual charge). For example, the person may pay \$10 for each office visit, \$75 for each day in the hospital, and \$5 for each drug prescription.

For the purposes of MEPS, paying \$0 for every visit, regardless of the services, is classified as a copayment.

CP03

CHARGE --

The dollar amount ASKED ('charged') for a service by a health care provider. This may not be the actual amount PAID to the provider.

CP04

COPAYMENT --

A fixed sum that a person pays for health services, regardless of the actual charge (the insurer pays the rest of the actual charge). For example, the person may pay \$10 for each office visit, \$75 for each day in the hospital, and \$5 for each drug prescription.

For the purposes of MEPS, paying \$0 for every visit, regardless of the services, is classified as a copayment.

TOTAL CHARGE --

The total dollar amount asked ('charged') for a service by a health care provider. This includes any amounts that are paid by health insurance or other sources, and may include charges for procedures such as x-rays, lab tests, or diagnostic procedures if performed during the visit to the provider.

CP05

ANYTHING IN WRITING --

A document that indicates the charges for services provided by a medical provider. This usually takes the form of a bill or statement listing the charges for a particular service or item. Also include receipts for payments.

CP06

PAID AT TIME OF VISIT --

The charge was paid at the time of the visit to the provider, and the person may not have received a bill.

MADE A COPAYMENT --

A co-payment is a fixed sum that a person pays for health services regardless of the actual charge (the insurer pays the rest of the actual charge). For example, the person may pay \$10 for each office visit, \$75 for each day in the hospital, and \$5 for each drug prescription.

BILL SENT DIRECTLY TO OTHER SOURCE --

This situation normally applies where the provider or the person sends the bill to the insurance company in order for the insurance company to pay the health care provider.

BILL HAS NOT ARRIVED --

The person expects to receive a bill from the health care provider as to the charges owed, however this bill has not arrived.

NO BILL SENT: HMO PLAN --

No bill was sent to the person since the charges were paid by the person's Health Maintenance Organization (HMO) or the services were received at an HMO facility. HMOs are organizations that have responsibility for providing comprehensive health care services in exchange for a fixed periodic payment. With an HMO, a person must generally receive their care from HMO physicians; otherwise the expense is not covered unless the person was referred by the HMO or there was a medical emergency. With an HMO, the cost of a visit is covered in full or you have to pay a small amount. HMOs can be sponsored by the government, medical schools, hospitals, employers, labor unions, consumer groups, insurance companies, and hospital-medical plans.

NO BILL SENT: VA (Veterans Administration) / CHAMPVA --

No bill was sent to the person since the charges were paid by either the Veterans Administration (VA), which provides medical services to veterans of the Armed Forces (particularly those with service-connected disabilities) or The Civilian Health and Medical Program of the Department of Veteran's Affairs (CHAMPVA), which provides health coverage to dependents and survivors of disabled or deceased veterans

NO BILL SENT: MILITARY FACILITY --

No bill was sent to the person because care was obtained at a military hospital or clinic located on a military base.

NO BILL SENT: PUBLIC ASSISTANCE/MEDICAID/SCHIP --

The charges were paid by public assistance, Medicaid or a State Children's Health Insurance Program (SCHIP). Medicaid is a federally-assisted, state-administered program that offers health benefits to low income persons on public assistance. The program also may cover the aged, the blind, and the disabled who are in financial need. Medicaid may be known by different names in different states.

The Children's Health Insurance Program (SCHIP) is a program which gives each state permission to offer health insurance for children, up to age 19, who are not already insured and for uninsured families with limited income and resources who earn too much to qualify for Medicaid. SCHIP is a state administered program and may be known by different names in different states.

NO BILL SENT: INDIAN HEALTH SERVICE --

No bill was sent because the person went to a provider employed by, or under contract to, the Indian Health Service (IHS), the agency responsible for providing federal health services to American Indians and Alaska Natives.

NO BILL SENT: WORKER'S COMPENSATION --

Worker's compensation is a system, required by law, of compensating workers injured or disabled in connection with work. The system establishes the liability of an employer for injuries or sickness that arise over and in the course of employment. The liability is created without regard to the fault or negligence of the employer. The benefits under this system generally include hospital and other medical payments and compensation for loss of income.

NO BILL SENT: SCHOOL, EMPLOYER, OR OTHER PRIVATE HEALTH CENTER/CLINIC --

No bill was sent because the care was provided by a school clinic, an employer clinic, or some other private health center or clinic. Care received in these types of clinics are usually provided as benefits to the recipient and the cost of the care is paid covered by the school, employer, or private health center.

NO BILL SENT: PUBLIC CLINIC/HEALTH CENTER OR PRIVATE CHARITY (INCLUDE COMMUNITY AND MIGRANT HEALTH CENTER AND FEDERALLY QUALIFIED HEALTH CENTERS) --

No bill was sent by the health care provider since the person went to a provider providing health care at no charge. These providers can include community and migrant health centers or Federally-qualified health centers, among others.

NO CHARGE: TELEPHONE CALL --

No bill was sent by the health care provider because the provider does not charge for consultation received over the telephone.

FREE FROM PROVIDER (PROFESSIONAL COURTESY/FREE SAMPLE)--

The provider provided the services as a professional courtesy extended from one provider to another or to family members or office staff. This can also include free samples of medicine, or the donation of a provider's services. This does NOT include visits to public or 'free' clinics where the services are covered by public and/or private funding sources. Such situations should be coded as No Bill Sent: Public clinic/health center or private charity.

GOVERNMENT-FINANCED RESEARCH AND CLINICAL TRIALS --

This includes all charges that were paid by the government or a research institute in return for the person's participation in medical research. The research may take the form of clinical trials of an experimental medication, which are part of the government's medical approval process. The person's participation does not necessarily involve a specific health condition.

INCLUDED WITH OTHER CHARGES --

This normally applies to a 'flat fee' situation where the person is charged a 'lump sum' for a variety of services or a series of visits which relate to the same condition.

FLAT FEE --

A situation where the person is charged a 'lump sum' for a variety of services or a series of visits which relate to the same condition.

CP07OV1

HMO --

HMOs are organizations that have responsibility for providing comprehensive health care services in exchange for fixed periodic payment. With an HMO, a person must generally receive their care from HMO physicians; otherwise the expense is not covered by the HMO unless the person was referred by the HMO or there was a medical emergency. With an HMO, the cost of a visit is typically covered in full or you have to pay a fixed amount of money per visit. HMOs can be sponsored by the government, medical schools, hospitals, employers, labor unions, consumer groups, insurance companies, and hospital-medical plans.

VA (Veterans Administration) / CHAMPVA --

The Veterans Administration, or VA, provides medical assistance to veterans of the Armed Forces, particularly those with service-connected disabilities.

The Civilian Health and Medical Program of the Department of Veteran's Affairs (CHAMPVA), provides health coverage to dependents and survivors of disabled or deceased veterans.

TRICARE--

TRICARE is a health care program for active duty and retired members of the uniformed services, their families, and survivors. TRICARE offers eligible beneficiaries three choices for their healthcare; TRICARE Prime - where military treatment facilities are the principal source of healthcare; TRICARE Extra - a preferred provider option; and TRICARE Standard - a fee-for-service option (the old CHAMPUS Program). TRICARE for life covers uniformed service beneficiaries who have attained the age of 65, are Medicare-eligible, and have purchased Medicare Part B.

OTHER MILITARY --

Includes any health care received on military bases by current active duty personnel and their dependents and retired Armed Forces members and their dependents or survivors.

PUBLIC ASSISTANCE/MEDICAID/SCHIP --

Public assistance refers to the government agencies concerned with providing aid to persons suffering from poverty, unemployment, etc. Their health care is provided through Medicaid. Medicaid is a federally-assisted, state-administered program that offers health benefits to low income persons on public assistance. The program also may cover the aged, the blind, and the disabled who are in financial need. Medicaid may be known by different names in different states.

The Children's Health Insurance Program (SCHIP) is a program which gives each state permission to offer health insurance for children, up to age 19, who are not already insured and for uninsured families with limited income and resources who earn too much to qualify for Medicaid. SCHIP is a state administered program and may be known by different names in different states.

INDIAN HEALTH SERVICE -

The Indian Health Service (IHS), an agency within the Department of Health and Human Services, is responsible for providing federal health services to American Indians and Alaska Natives.

WORKER'S COMPENSATION --

A system, required by law, of compensating workers injured or disabled in connection with work. The system establishes the liability of an employer for injuries or sickness that arise over

and in the course of employment. The liability is created without regard to the fault or negligence of the employer. The benefits under this system generally include hospital and other medical payments and compensation for loss of income.

PRIVATE INSURANCE COMPANY --

A corporation primarily engaged in the business of selling insurance policies to the public.

CP08

TOTAL CHARGE --

The total dollar amount asked ('charged') for a service by a health care provider. This includes any amounts that are paid by health insurance or other sources, and may include charges for procedures such as x-rays, lab tests, or diagnostic procedures if performed during the visit to the provider.

FLAT FEE --

A situation where the person is charged a 'lump sum' for a variety of services or a series of visits which relate to the same condition.

CP09

CP09OV1

WHAT MAKES UP TOTAL CHARGE --

The total dollar amount asked ('charged') for a service by a health care provider. This includes:

- any amounts that are paid by health insurance or other sources,
- any charges for procedures such as x-rays, lab tests, or diagnostic procedures if performed during the visit to the provider.

If the bill or statement lists charges for procedures separate from other charges for the visit and are not included in the total charge, add those charges to the others to obtain one 'total charge' that includes ALL charges that are associated with the visit. However, if the person has a SEPARATE bill or statement for procedures such as x-rays or lab work, do NOT include those charges in the total charge for the visit. These charges will be recorded at a different screen.

FLAT FEE --

A situation where the person is charged a 'lump sum' for a variety of services or a series of visits which relate to the same condition.

CP10

SET AMOUNT --

An amount a provider charges for a visit no matter what the specific services provided during a particular visit were. A possible example of this are regular visits to a physical therapist for treatment: the specific treatment may be different from visit to visit yet the charge is always the same.

COPAYMENT --

A fixed sum that a person pays for health services, regardless of the actual charge (the insurer pays the rest of the actual charge). For example, the beneficiary may pay \$10 for each office visit, \$75 for each day in the hospital, and \$5 for each drug prescription.

For the purposes of MEPS, paying \$0 for every visit, regardless of the services, is classified as a copayment.

CP11

CP11OV1

CP11OV2

AMOUNTS TO INCLUDE --

Any and all amounts paid directly (e.g., out-of-pocket, up-front) to the provider/pharmacy/place for the care or services received. This includes all amounts that may have been reimbursed later by any provider or insurance company.

CP12

SOURCE --

Any person, company, or organization, besides the person or family, that made any payments to the provider/pharmacy/place for the care or services received. This includes health insurance companies, HMOs, employers, car or home owner's insurance, worker's compensations policies, Medicare, Medicaid, SCHIP (State Children's Health Insurance Program) or other types of public programs, etc.

This source should have paid the provider/pharmacy/place DIRECTLY, that is, the family should not be paid in the anticipation that they would in turn pay the provider. If this is the case, consider it a reimbursement, not a direct payment.

ALREADY PAID --

The person or family assumes the source has sent in the payment to the provider/pharmacy/place for the care or services received.

CP13

PAYMENTS MADE DIRECTLY TO PROVIDER --

Any source that has paid the provider/pharmacy/place DIRECTLY, that is, the family was not paid by the source in the anticipation

that the family would in turn pay the provider. If this is the case, consider it a reimbursement, not a direct payment.

A SOURCE is any person, company, or organization, besides the person or family, that made any payments to the provider/pharmacy/place for the care or services received. This includes health insurance companies, HMOs, employers, car or home owner's insurance, worker's compensations policies, Medicare, Medicaid, SCHIP (State Children's Health Insurance Program) or other types of public programs, etc.

CP14

SOURCE --

Any person, company, or organization, besides the person or family, that made any reimbursement to the family for the care or services received. This includes health insurance companies, HMOs, employers, car or home owner's insurance, worker's compensations polices, Medicare, Medicaid, SCHIP (State Children's Health Insurance Program) or other types of public programs, etc.

REIMBURSEMENT --

Repayment by a third party (usually an insurance company) for charges a person pays for health care services covered by the person's health insurance plan. For example, the terms of a person's health insurance plan may require that a person pay the pharmacy directly for a prescription and then request a 'reimbursement' from his/her insurance company for all or a percentage of the total amount paid.

CP15

REIMBURSEMENT --

Repayment by a third party (usually an insurance company) for charges a person pays for health care services covered by the person's health insurance plan. For example, the terms of a person's health insurance plan may require that a person pay the pharmacy directly for a prescription and then request a 'reimbursement' from his/her insurance company for all or a percentage of the total amount paid.

CP38

PROVIDER NAME --

In some instances, a provider may have more than one name. This question is asking if the paperwork (i.e., bill or statement) indicates that the provider is listed under another name. For example, a respondent may report that the hospital's name is the University of Chicago Hospital when the bill indicates that the patient was seen at Wyler Children's Hospital.

RE02
RE06

RESPONDENT RULES -

BEST/PREFERRED RESPONDENT:

The best or preferred respondent for the interview is the person who is most knowledgeable about the family's health care and who is keeping records about health care use and expenses since January 1st.

For ROUND 1, this is likely to be the person who was the respondent for the NHIS interview and, in most cases, was the person contacted on the advance contact effort.

For ROUNDS 2-5, the best respondent is the person who was respondent for the previous round's interview.

SELECTING A NEW RU MEMBER AS RESPONDENT:

If you need to select a new respondent for the RU, select an RU member who is at least 18 years old or older and knowledgeable about the family's health care use and expenses. Always encourage all adult RU members to assist with the interview, especially if there is a specific RU member for whom the selected respondent cannot provide all health information. Keep in mind that a new respondent may also be a new member of the RU. Verify that the person is a member of the RU before selecting 'RU member' for respondent type.

PROXY RESPONDENTS:

In a small number of cases it may not be possible to conduct an interview with an RU member. Examples include:

- A single person RU consisting of an elderly respondent with impaired memory or who is unable to focus on the interview.
- An RU where all members have died and/or entered an institution on or after the first day of the reference period (for Round 1, this date is January 1st; for Rounds 2-5, this date is the date of the previous round's interview).

In cases where a proxy respondent is necessary, try to determine who outside the RU could provide information about the medical care and expenses for the RU member(s). The proxy respondent must be someone 18 years or older who can provide information about the RU member(s) health care use and expenses during the person's reference period.

BEFORE YOU COMPLETE THE INTERVIEW WITH A PROXY, YOU MUST OBTAIN APPROVAL FROM YOUR SUPERVISOR.

NOTE: If Round 1 and the only RU member died or entered an institution BEFORE January 1st, DO NOT CONTINUE WITH THE INTERVIEW. Verify the date of death or institutionalization and close out the case.

RE09

LOCATING ADDRESS --

The locating address is where the RU members actually live. This will not necessarily be the same as the address where their mail is received or as their legal or voting residence. It is the address you will use to locate the RU for the in-person interview. Try to obtain as complete an address as possible, verifying or obtaining house numbers and apartment numbers when necessary. If the locating address is a description (for example, brick house with green shutters and front porch), probe the respondent for the actual address, such as the one the post office uses to deliver mail to the home. Be sure to verify all parts of the address, including the zip code. If the respondent reports that there is a separate mailing address (for example, a post office box), tell the respondent that you will be asking for the mailing address at the end of the interview.

RE10

RE10OV1

RE10OV2

RE10OV3

RE10OV4

RE40

RE40OV1

RE40OV2

RE40OV3

RE40OV3

RE40OV4

RE40OV5

RE66H

RE66HOV1

RE66HOV2

RE66HOV3

RE66HOV4

RE66HOV5

RE74

RE74OV1

RE74OV2

RE74OV3

RE74OV4

RE74OV5

RE110

RE110OV1

RE110OV2

RE110OV3

RE110OV4

RE110OV5

RE110OV6

RE110OV7

RE111A

RE111AO1

RE111A02
RE111A03
RE111A04
RE111A05
RE111A06
RE111A07
PM14
PM14OV1
PM14OV2
PM14OV3
PM14OV4
PM14OV5
PM14OV6
PM14OV7
PM14OV8
PM15
PM15OV1
PM15OV2
PM15OV3
PM15OV4
PM15OV5
PM15OV6
PM15OV7
PM15OV8
PD18
PD18OV1
PD18OV2
PD18OV3
PD18OV4
PD18OV5
PD18OV6
PD18OV7
PD18OV8
PD18OV9
PD18OV10
PD18OV11
PD18OV12
CL47
CL47OV1
CL47OV2
CL47OV3
CL47OV4
CL47_2
CL47_2_OV1
CL47_2_OV2
CL47_2_OV3
CL47_2_OV4
CL49
CL49OV1
CL49OV2
CL49OV3
CL49OV4
CL49OV5
CL49OV6

CL49OV7
CL49_2
CL49_2_OV1
CL49_2_OV2
CL49_2_OV3
CL49_2_OV4
CL49_2_OV5
CL49_2_OV6
CL49_2_OV7
CL51
CL51OV1
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CL55OV9
CL55OV10
CL55_2
CL55_2_OV1
CL55_2_OV2
CL55_2_OV3
CL55_2_OV4
CL55_2_OV5
CL55_2_OV6
CL55_2_OV7
CL55_2_OV8
CL55_2_OV9
CL55_2_OV10
CL59
CL59OV1
CL59OV2
CL59OV3
CL59OV4
CL59OV5
CL59OV6
CL59OV7
CL61B
CL61BOV3
CL61BOV4
CL61BOV5

CL61BOV6
CL61BOV7
CL61BOV8
CL61BOV9
CL61B_2
CL61B_2_OV3
CL61B_2_OV4
CL61B_2_OV5
CL61B_2_OV6
CL61B_2_OV7
CL61B_2_OV8
CL61B_2_OV9

STATE ABBREVIATIONS --

Alabama: AL
Alaska: AK
Arizona: AZ
Arkansas: AR
California: CA
Colorado: CO
Connecticut: CT
Delaware: DE
District of Columbia: DC
Florida: FL
Georgia: GA
Hawaii: HI
Idaho: ID
Illinois: IL
Indiana: IN
Iowa: IA
Kansas: KS
Kentucky: KY
Louisiana: LA
Maine: ME
Maryland: MD
Massachusetts: MA
Michigan: MI
Mississippi: MS
Minnesota: MN
Missouri: MO
Montana: MT
Nebraska: NE
Nevada: NV
New Hampshire: NH
New Jersey: NJ
New Mexico: NM
New York: NY
North Carolina: NC
North Dakota: ND
Oklahoma: OK
Ohio: OH
Oregon: OR
Pennsylvania: PA
Rhode Island: RI
South Carolina: SC

South Dakota: SD
Tennessee: TN
Texas: TX
Utah: UT
Vermont: VT
Virginia: VA
Washington: WA
West Virginia: WV
Wisconsin: WI
Wyoming: WY
Foreign Country: FC

Please use the code 'FC' anytime the respondent indicates that the address, provider, job, pharmacy, etc. was not in one of the 50 states. Record the name of the city or province, and the country name in the city field. Record 'FC' in the state field. For example, if your respondent lives in Buffalo, NY and reported that he or she worked in Toronto, Canada, you would record 'Toronto, Canada' in the city field and 'FC' in the state field.

RE11

FREQUENTLY ASKED QUESTIONS --

You have never recorded me before. Why now?

Prior to now we didn't have the capability to record. Now that we do, we can use the recordings to improve the survey and for quality control.

Which questions are you recording?

It is a random selection of questions that are selected for recording.

Do I have to be recorded?

No, we can continue the interview without the recording.

What are the recordings being used for? Who will hear them?

The recordings are mainly for quality control purposes. We will also use the recordings to identify ways to improve the survey questions. Only MEPS project staff will have access to the recordings. Your personal information will never be shared with anyone.

RE130V
RE130V1

MARRIED --

Refers to legal marriage. This includes common law marriages in states where common law marriages are recognized (i.e., if state law considers them married, we consider them married).

WIDOWED --

Spouse is deceased.

DIVORCED --

Legal cancellation of marriage.

SEPARATED --

Legal or informal separation due to marital discord. It is necessary to probe further when a person is reported as 'separated' -- if the spouse is absent for reasons other than marital discord, the 'married' category applies.

A person is considered NEVER MARRIED if s/he has never been LEGALLY married. If the person has had informal unions in the past but has never had a legal marriage, s/he is included in this category even if s/he considered themselves as living together as married partners. If the respondent asks what is meant by marriage, tell him or her that we are only interested in LEGAL married status for this question. However, accept what the respondent tells you here without attempting to reconcile the response with information given previously concerning the marital status of the person. For example, if a respondent tells you here that he is married, but when you collected relationship information he told you that the woman he is living with is his 'partner', you would code him here as married and continue to the next person in the RU without questioning his response. An answer indicating that an RU member is 'single' or 'not married' should be probed to determine if s/he has been married in the past or not.

RE14
RE15
RE15OV1
RE15OV2
RE66E
RE96B1
RE96B2
RE94A
RE95
RE95A
RE95B
RE95E
RE96B
RE96B1
RE96B2

FULL-TIME ACTIVE DUTY (WITH THE ARMED FORCES) --

This includes:

- Persons on full-time active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard unit presently activated as part of the regular Armed Forces.
- Persons in the Reserve Forces or National Guard called up to active duty service for a period of three months or longer.

RE19

INSTITUTIONALIZED IN A HEALTH CARE FACILITY --

A person is considered institutionalized in a health care facility if s/he is living in a facility that provides 24-hour continuous skilled nursing and is staffed with trained medical personnel. Institutions that provide this type of care include:

NURSING HOMES -

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTIONS (MUST PROVIDE 24-HOUR SKILLED NURSING CARE) -

An institution other than a nursing home that provides 24-hour continuous skilled nursing care for patients, regardless of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term health care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers) as well as non-professionals (family, others) and may be delivered in a health care or other institution.

If the person is admitted as an inpatient to a community-based hospital, regardless of the length of stay, do not code them as institutionalized, and include them in the MEPS interview.

RE19A

LIVING WITH THIS FAMILY --

Person is living with this family at the time of the current round interview. This is the person's usual place of residence where the person plans to live for the foreseeable future.

USUAL PLACE OF RESIDENCE SOMEWHERE ELSE --

Person is not living with the family at the time of the current round interview, but has usual place of residence somewhere else. This could include living in another household or living in a military facility.

DECEASED --

The person is no longer living at the time of the current round interview.

RE19B

RE19BOV

RE19BOV1

RE19BOV2

RE19BOV3

RE19BOV4

RE19C
RE19COV
RE19COV1
RE19COV2
RE19COV3
RE19COV4
RE19D
RE19DOV1
RE19DOV2

LEAVE THE HEALTH CARE FACILITY --

The person must have been discharged from or have formally left the health care facility because the person is deceased or because the person is now living somewhere other than the health care facility. If the person has only temporarily left the health care facility to visit family or for a stay in the hospital, do not count this as having left the facility.

RE19E

INSTITUTIONALIZED IN A HEALTH CARE FACILITY --

A person is considered institutionalized in a health care facility if s/he is living in a facility that provides **24-hour** continuous **skilled** nursing and personal care and is staffed with trained medical personnel. Institutions that provide this type of care include:

NURSING HOMES -

An institution that provides **24-hour** continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTIONS (**MUST PROVIDE 24-HOUR SKILLED NURSING CARE**) -

An institution other than a nursing home that provides **24-hour continuous skilled nursing** and personal care for patients, regardless of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers) as well as non-professionals (family, others) and may be delivered in a health care or other institution.

If the person is admitted as an inpatient to a community-based hospital, regardless of the length of stay, do not code them as institutionalized, and include them in the MEPS interview.

INSTITUTIONALIZED IN A NON-HEALTH CARE FACILITY --

A person is institutionalized in a non-health care facility if s/he is living in a correctional facility. Non-health care facilities include:

Homes for juvenile delinquents, jails, and prisons.

STUDENT UNDER 24 LIVING AWAY AT SCHOOL IN GRADES 1-12 --

A person under 24 years old who usually lives in the household, but at the time of this interview lives at a boarding school or academy in grades 1-12. Grades 1-12 includes elementary school, middle school, high school (both junior and senior high school). The school can be public, private, military, or parochial.

STUDENT UNDER 24 LIVING AWAY AT POST-SECONDARY SCHOOL --

A person under 24 years old who usually lives in the household, but at the time of this interview lives away at post-secondary school. If the person returns to the RU on weekends, school holidays or vacations, we still consider him/her as "living away at school". Post-secondary school includes:

COLLEGES OR UNIVERSITIES -

Junior college, community college, four-year college or university, nursing school or seminary where a college degree is offered, and graduate school or professional school that is attended after obtaining a degree from a 4-year institution.

OTHER TRAINING SCHOOLS AFTER HIGH SCHOOL -

Secretarial school, mechanical or computer training school, nursing school where a college degree is NOT offered, and any other vocational, trade, or business school where a college degree is not offered. The person need NOT have obtained a high school diploma or equivalency to attend this type of school.

ANOTHER HOUSEHOLD - CURRENTLY NOT FULL-TIME MILITARY --

Person is living in another household and is not on full-time active duty in the Armed Forces on the date of the current round interview. This includes persons who are living in a different household, either inside the U.S. or outside the U.S. DO NOT include persons who are living in an institution or are living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about is on full-time active duty in the military (i.e., the Armed Forces of the United States) on the date of the current round interview. DO NOT include persons who are on full-time active duty in the military in this category. See definition of full-time active duty in the Armed Forces below.

ANOTHER HOUSEHOLD/MILITARY FACILITY - CURRENTLY FULL-TIME MILITARY --

Person is living in another household or military facility and is on full-time active duty in the Armed Forces on date of the current round interview. This includes persons who are living in another household or in a military facility, either inside the U.S. or outside the U.S. DO NOT include persons who are living in an institution or were living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about is on full-time active duty in the military (i.e., the Armed Forces of the United States) on the date of the current round interview. Include only persons who ARE on full-time active duty in the military in this category.

Person who are considered to be ON FULL-TIME ACTIVE DUTY IN THE ARMED FORCES includes:

- Persons on full-time active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard unit presently activated as part of the regular Armed Forces.
- Persons in the Reserve Forces or National Guard called up to active duty service for a period of three months or longer.

RE19F
RE37
RE73B

LIVING WITHIN U.S. --

This includes all the states in the United States, including Hawaii and Alaska. It does NOT include the U.S. territories such as Puerto Rico, Guam, or the U.S. Virgin Islands.

LIVING OUTSIDE U.S. --

This includes all countries other than the United States as well as territories such as Puerto Rico, Guam, and the U.S. Virgin Islands. Hawaii and Alaska are considered INSIDE the United States.

RE19G
RE56
RE80

GRADES 1-12 --

Includes elementary school, middle school, and high school (both junior and senior high school). The school can be public, private, military, or parochial.

COLLEGE OR UNIVERSITY --

Junior college, community college, four-year college or university, nursing school or seminary where a college degree is offered, and graduate school or professional school that is attended after obtaining a degree from a 4-year institution.

OTHER TRAINING SCHOOL AFTER HIGH SCHOOL --

Secretarial school, mechanical or computer training school, nursing school where a college degree is NOT offered, and any other vocational, trade, or business school where a college degree is not offered. The person need NOT have obtained a high school diploma or equivalency to attend this type of school.

RE19H
RE19HOV
RE38
RE38OV1
RE66K
RE73C
RE73COV1

ANOTHER HOUSEHOLD --

If the full-time active duty armed forces person lives in any place of private residence including apartments, townhouses, houses, co-ops, mobile homes, boarding rooms, etc. OR the full-time active duty armed forces member is living with at least one civilian, key RU member in military housing, code person as living in another household.

MILITARY FACILITY --

If person lives in any building or grounds on an Army, Air Force, Navy, Marine, or Coast Guard base, military training school or academy (Army (West Point), Air Force, Naval or Coast Guard academies); or any other facility owned exclusively for military purposes WITHOUT at least one civilian, key RU member, code person as living in military facility.

LIVING WITHIN U.S. --

This includes all the states in the United States, including Hawaii and Alaska. It does NOT include the U.S. territories such as Puerto Rico, Guam, or the U.S. Virgin Islands.

LIVING OUTSIDE U.S. --

This includes all countries other than the United States as well as territories such as Puerto Rico, Guam, and the U.S. Virgin Islands. Hawaii and Alaska are considered INSIDE the United States.

RE21

HH MEMBERSHIP RULES --

Persons are considered members of this RU if they are related to the reference person by blood, marriage, living together as married, adoption or foster care relationship and meet the following criteria:

- have no other permanent address elsewhere, or
- spend most of the year in this dwelling unit even though they may have another residence.

Consider persons who are just temporarily away (in a hospital, away on a business trip, or on vacation) as still in this RU.

A student living away at school in grades 1 through 12 will be included in this RU's interview, but should be coded as having left the RU at this question. Later in the interview, you will code the reason this person is no longer in the RU as 'Student Under 24 Living Away at School in Grades 1-12'. This will tell CAPI to keep the person as a current RU member.

A student living away at post-secondary school should also be coded as no longer in the RU. However, post-secondary students will be removed from the RU and interviewed separately. You will code this person as 'Student Under 24 Living Away at Post-Secondary School' later in the interview.

ROUND 1 ONLY: During Round 1 you may learn that a person listed as a member of the household at the time of the NHIS was listed incorrectly. That is, he or she did not meet the rules of household membership for this RU at the time of the NHIS. For example, the person may have been just visiting at the time of the NHIS, but had a primary residence elsewhere. Select 'Incorrectly listed in RU during NHIS' for this person if you learned he/she did not meet the rules of household membership.

ROUND 2 - 5 ONLY: During Rounds 2-5 you may learn that a person listed as a member of the household at the time of the previous round's interview was listed incorrectly. That is, he or she did not meet the rules of household membership for this RU at the time of the interview. For example, the person may have been just visiting at the time of the interview, but had a primary residence elsewhere or the person may not be related to the reference person. If either situation applies, select 'Incorrectly listed in RU during previous interview' for this person.

RE35

DECEASED --

The person is no longer living.

STUDENT UNDER 24 LIVING AWAY AT SCHOOL IN GRADES 1-12 --

A person under 24 years old who usually lives in the household, but at the time of this interview lives at a boarding school or academy in grades 1-12. Grades 1-12 includes elementary school, middle school, high school (both junior and senior high school). The school can be public, private, military, or parochial.

STUDENT UNDER 24 LIVING AWAY AT POST-SECONDARY SCHOOL --

A person under 24 years old who usually lives in the household, but at the time of this interview lives away at post-secondary school. If the person returns to the RU on weekends, school holidays or vacations, we still consider him/her as "living away at school". Post-secondary school includes:

COLLEGES OR UNIVERSITIES -

Junior college, community college, four-year college or university, nursing school or seminary where a college degree is offered, and graduate school or professional school that is attended after obtaining a degree from a 4-year institution.

OTHER TRAINING SCHOOLS AFTER HIGH SCHOOL -

Secretarial school, mechanical or computer training school, nursing school where a college degree is NOT offered, and any other vocational, trade, or business school where a college degree is not offered. The person need NOT have obtained a high school diploma or equivalency to attend this type of school.

MOVED - CURRENTLY NOT IN MILITARY --

This includes persons who have moved out of the household to other households, either inside the U.S. or outside the U.S. DO NOT include persons who moved to an institution or are living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about is currently on full-time active duty in the military (i.e., the Armed Forces of the United States). DO NOT include persons who are currently on full-time active duty in the military in this category. See definition of full-time active duty in the Armed Forces below.

MOVED - CURRENTLY ON FULL-TIME ACTIVE DUTY IN ARMED FORCES --

This includes persons who have moved out of the household to another household or to a military facility, either inside the U.S. or outside the U.S. DO NOT include persons who moved to an institution or are living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about is currently on full-time active duty in the military (i.e., the Armed Forces of the United States). Include only persons who ARE currently on full-time active duty in the military in this category.

Person who are considered to be CURRENTLY ON FULL-TIME ACTIVE DUTY IN THE ARMED FORCES includes:

- Persons on full-time active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard unit presently activated as part of the regular Armed Forces.
- Persons in the Reserve Forces or National Guard called up to active duty service for a period of three months or longer.

INSTITUTIONALIZED --

A person is considered institutionalized if s/he is living in a facility that provides 24-hour continuous skilled nursing and personal care and is staffed with trained medical personnel, or if s/he is living in a correctional facility. Institutions include:

NURSING HOMES -

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTIONS (**MUST PROVIDE 24-HOUR SKILLED NURSING CARE**) -

An institution, other than a nursing home that provides 24-hour skilled nursing care for patients, regardless of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers) as well as non-professionals (family, others) and may be delivered in a health care or other institution.

If the person is admitted as an inpatient to a community-based hospital, regardless of the length of stay, do not code them as institutionalized, and include them in the MEPS interview.

OTHER NON-HEALTH CARE INSTITUTIONS -

This includes homes for juvenile delinquents, and jails or prisons.

RE36
RE66G
RE73A

NURSING HOMES --

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTION (MUST PROVIDE 24-HOUR SKILLED NURSING CARE) --

An institution other than a nursing home that provides 24-hour continuous skilled nursing care for patients, regardless of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term health care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers) as well as non-professionals (family, others) and may be delivered in a health care or other institution.

If the person is admitted as an inpatient to a community-based hospital, regardless of the length of stay, do not code them as institutionalized, and include them in the MEPS interview.

OTHER NON-HEALTH CARE INSTITUTION --

This includes homes for juvenile delinquents, and jails or prisons.

RE42
RE43

OWNS/RENTS HOME --

A person OWNS the home even if they are still paying on a mortgage. A person RENTS the home if s/he pays on a continuing basis without gaining any rights to ownership.

If more than one person 'owns or rents' the home, ask the respondent to choose one person. This person will then be used as the reference person in the remainder of the interview.

RE44

HEAD OF HOUSEHOLD --

If no one in the household owns or rents the home, we ask for the name of the 'head of household'. This is the person in the household who has the primary responsibility for the care of the family.

If more than one person is considered 'head of household', ask the respondent to choose one person. This person will then be used as the reference person in the remainder of the interview.

RE46
RE46OV1
RE47

LIVING TOGETHER AS MARRIED/PARTNER RELATIONSHIPS --

In addition to marriage, two people in a 'partner' relationship who are not married are considered related. **This applies BOTH to partners of the same sex and of different sexes.**

Because these are relationships between the household member and the Reference Person that the respondent may not have considered or offered, you may need to probe to determine if this category applies.

Example:

If the respondent is the Reference Person and is female and reports the relationship of an unrelated male to be a 'friend', you would want to tactfully probe to determine if she considers him her boyfriend or living together as married partners instead

of just friends. If she says they are living together as married, they would be considered related. If they are NOT living together as if they are married partners, they should be viewed as unrelated.

RE56A

PERSON WAS ...

INSTITUTIONALIZED --

A person was institutionalized if s/he was living in a health care facility that provided 24-hour continuous skilled nursing care (and was staffed with trained medical personnel) or if s/he was living in a correctional facility. Institutions include:

NURSING HOMES -

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTIONS (**MUST PROVIDE 24-HOUR SKILLED NURSING CARE**) -

An institution, other than a nursing home, that provides 24-hour continuous skilled nursing care for patients, regardless of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term health care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers) as well as non-professionals (family, others) and may be delivered in a health care or other institution.

If the person is admitted as an inpatient to a community-based hospital, regardless of the length of stay, do not code them as institutionalized, and include them in the MEPS interview.

OTHER NON-HEALTH CARE INSTITUTIONS -

This includes homes for juvenile delinquents, and jails or prisons.

STUDENT UNDER 24 LIVING AWAY AT POST-SECONDARY SCHOOL --

A person under 24 years old who usually lives in the household, but at the time of this interview lives away at post-secondary school. If the person returns to the RU on weekends, school holidays or vacations, we still consider him/her as "living away at school". Post-secondary school includes:

COLLEGES OR UNIVERSITIES -

Junior college, community college, four-year college or university, nursing school or seminary where a college degree is offered, and graduate school or professional school that is attended after obtaining a degree from a 4-year institution.

OTHER TRAINING SCHOOLS AFTER HIGH SCHOOL -

Secretarial school, mechanical or computer training school, nursing school where a college degree is NOT offered, and any other vocational, trade, or business school where a college degree is not offered. The person need NOT have obtained a high school diploma or equivalency to attend this type of school.

PERSON WAS NOT FT MILITARY AT TIME OF NHIS AND WAS ...

It is important to determine if the person being asked about was serving on full-time active duty in the military (i.e., the Armed Forces of the United States) at the time of the NHIS interview. DO NOT include persons who were serving on full-time active duty in the military at the time of the NHIS in this category. See definition of full-time active duty in the Armed Forces below.

LIVING IN U.S. --

This includes all the states in the United States, including Hawaii and Alaska. It does NOT include the U.S. territories such as Puerto Rico, Guam, or the U.S. Virgin Islands.

LIVING OUTSIDE U.S. --

This includes all countries other than the United States as well as territories such as Puerto Rico, Guam, and the U.S. Virgin Islands. Hawaii and Alaska are considered INSIDE the United States.

PERSON WAS FT MILITARY AT TIME OF NHIS AND WAS ...

It is important to determine if the person being asked about was serving on full-time active duty in the military (i.e., the Armed Forces of the United States) at the time of the NHIS interview. Include only persons who WERE serving on full-time active duty in the military at the time of the NHIS in this category.

Person who are considered to have been SERVING ON FULL-TIME ACTIVE DUTY IN THE ARMED FORCES includes:

- Persons on full-time active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard unit presently activated as part of the regular Armed Forces.
- Persons in the Reserve Forces or National Guard called up to active duty service for a period of three months or longer.

LIVING AT A MILITARY FACILITY --

Refers to any building or grounds on an Army, Air Force, Navy, Marine, or Coast Guard base; military training schools; military academies (Army (West Point), Air Force, Naval or Coast Guard academies); or any other facility owned exclusively by the military or use exclusively for military purposes.

LIVING OUTSIDE U.S. --

This includes all countries other than the United States as well as territories such as Puerto Rico, Guam, and the U.S. Virgin Islands. Hawaii and Alaska are considered INSIDE the United States.

LIVING IN ANOTHER HOUSEHOLD IN U.S. --

A household includes any place of private residence including apartments, townhouses, houses, co-ops, mobile homes, boarding rooms, etc. 'In U.S.' includes all the states in the United States, including Hawaii and Alaska. It does NOT include the U.S. territories such as Puerto Rico, Guam, or the U.S. Virgin Islands.

RE66C

LIVING IN AN INSTITUTION --

A person was living in an institution if s/he was living in a health care facility that provided 24-hour continuous skilled nursing and personal care and was staffed with trained medical personnel and are expected to remain in the facility for longer than 100 days or if s/he was living in a correctional facility. Institutions include:

NURSING HOMES -

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTIONS (**MUST PROVIDE 24-HOUR SKILLED NURSING CARE**) -

An institution, other than a nursing home that provides 24-hour continuous skilled nursing care for patients, regardless of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term health care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers) as well as non-professionals (family, others) and may be delivered in a health care or other institution.

If the person is admitted as an inpatient to a community-based hospital, regardless of the length of stay, do not code them as institutionalized, and include them in the MEPS interview.

OTHER NON-HEALTH CARE INSTITUTIONS -

This includes homes for juvenile delinquents, and jails or prisons.

RE66D

LIVING OUTSIDE U.S. --

This includes all countries other than the United States as well as territories such as Puerto Rico, Guam, and the U.S. Virgin Islands. Hawaii and Alaska are considered INSIDE the United States.

RE66F

RE66FOV

NOT YET BORN --

Person had not yet been born on date in question.

STUDENT UNDER 24 LIVING AWAY AT SCHOOL IN GRADES 1-12 --

Person was under 24 years old, usually lived in the household, but was living at a boarding school or academy in grades 1-12. Grades 1-12 includes elementary school, middle school, high school (both junior and senior high school). The school can be public, private, military, or parochial.

STUDENT UNDER 24 LIVING AWAY AT POST-SECONDARY SCHOOL --

Person was under 24 years old, usually lived in the household, but was living away at post-secondary school. If the person returned to the RU on weekends, school holidays or vacations, we still consider him/her as "living away at school". Post-secondary school includes:

COLLEGES OR UNIVERSITIES -

Junior college, community college, four-year college or university, nursing school or seminary where a college degree is offered, and graduate school or professional school that is attended after obtaining a degree from a 4-year institution.

OTHER TRAINING SCHOOLS AFTER HIGH SCHOOL -

Secretarial school, mechanical or computer training school, nursing school where a college degree is NOT offered, and any other vocational, trade, or business school where a college degree is not offered. The person need NOT have obtained a high school diploma or equivalency to attend this type of school.

ANOTHER HOUSEHOLD - NOT FULL-TIME MILITARY ON (DATE SHOWN ON CAPI SCREEN) --

Person was a living in another household and was not on full-time active duty in the Armed Forces. This includes persons who were living in a different household. DO NOT include persons who were living in an institution or were living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about was on full-time active duty in the military (i.e., the Armed Forces of the United States). DO NOT include persons who were on full-time active duty in the military in this category. See definition of full-time active duty in the Armed Forces below.

ANOTHER HOUSEHOLD OR MILITARY FACILITY-FULL-TIME MILITARY
ON (DATE SHOWN ON CAPI SCREEN) --

Person was a living in another household, military facility or military academy AND was on full-time active duty in the Armed Forces. This includes persons who were living in another household or in a military facility. DO NOT include persons who were living in an institution or were living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about was on full-time active duty in the military (i.e., the Armed Forces of the United States). Include only persons who WERE on full-time active duty in the military in this category.

Person who are considered to be ON FULL-TIME ACTIVE DUTY IN THE ARMED FORCES includes:

- Persons on full-time active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard unit presently activated as part of the regular Armed Forces.
- Persons in the Reserve Forces or National Guard called up to active duty service for a period of three months or longer.

LIVING WITH THIS FAMILY (PERSON LEFT OFF ROSTER LAST INTERVIEW) --

Person was living with this family, but was not included as part of the family during the previous interview.

INSTITUTIONALIZED --

A person was institutionalized if s/he was living in a facility that provided 24-hour continuous skilled nursing and personal care (and was staffed with trained medical personnel) or if s/he was living in a correctional facility. Institutions include:

NURSING HOMES -

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTIONS (**MUST PROVIDE 24-HOUR SKILLED NURSING CARE**) -

An institution, other than a nursing home, that provides 24-hour continuous skilled nursing care for patients, regardless of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term health care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers)

as well as non-professionals (family, others) and may be delivered in a health care or other institution.

If the person is admitted as an inpatient to a community-based hospital, regardless of the length of stay, do not code them as institutionalized, and include them in the MEPS interview.

OTHER NON-HEALTH CARE INSTITUTIONS -

This includes homes for juvenile delinquents, and jails or prisons.

RE73
RE73OV1

NOT YET BORN --

Person had not yet been born on the date in question.

STUDENT UNDER 24 LIVING AWAY AT SCHOOL IN GRADES 1-12 --

Person was under 24 years old, usually lived in the household, but was living at a boarding school or academy in grades 1-12. Grades 1-12 includes elementary school, middle school, high school (both junior and senior high school). The school can be public, private, military, or parochial.

STUDENT UNDER 24 LIVING AWAY AT POST-SECONDARY SCHOOL --

Person was under 24 years old, usually lived in the household, but was living away at post-secondary school. If the person returned to the RU on weekends, school holidays or vacations, we still consider him/her as "living away at school". Post-secondary school includes:

COLLEGES OR UNIVERSITIES -

Junior college, community college, four-year college or university, nursing school or seminary where a college degree is offered, and graduate school or professional school that is attended after obtaining a degree from a 4-year institution.

OTHER TRAINING SCHOOLS AFTER HIGH SCHOOL -

Secretarial school, mechanical or computer training school, nursing school where a college degree is NOT offered, and any other vocational, trade, or business school where a college degree is not offered. The person need NOT have obtained a high school diploma or equivalency to attend this type of school.

ANOTHER HOUSEHOLD (NOT MILITARY AT TIME OF NHIS) --

Person was a living in another household and was not on full-time active duty in the Armed Forces on date of the NHIS interview. This includes persons who were living in a different household, either inside the U.S. or outside the U.S. DO NOT include persons who were living in an institution or were living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about was on full-time active duty in the military (i.e., the Armed Forces of the United States) on the date of the NHIS interview. DO NOT include persons who were on full-time active duty in the military in this category. See definition of full-time active duty in the Armed Forces below.

ANOTHER HOUSEHOLD OR MILITARY FACILITY (ON FULL-TIME ACTIVE DUTY IN THE ARMED FORCES AT TIME OF NHIS) --

Person was a living in another household, military facility or military academy and was on full-time active duty in the Armed Forces on date of the NHIS interview. This includes persons who were living in another household or in a military facility, either inside the U.S. or outside the U.S. DO NOT include persons who were living in an institution or were living away at school, either grades 1-12 or post-secondary, in this category.

It is important to determine if the person being asked about was on full-time active duty in the military (i.e., the Armed Forces of the United States) on the date of the NHIS interview. Include only persons who WERE on full-time active duty in the military in this category.

Person who are considered to be ON FULL-TIME ACTIVE DUTY IN THE ARMED FORCES includes:

- Persons on full-time active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard unit presently activated as part of the regular Armed Forces.
- Persons in the Reserve Forces or National Guard called up to active duty service for a period of three months or longer.

LIVING WITH THIS FAMILY (PERSON LEFT OFF NHIS ROSTER) --

Person was living with this family at the time of the NHIS interview, but was not included as part of the family during the NHIS interview.

INSTITUTIONALIZED --

A person was institutionalized if s/he was living in a health care facility that provided 24-hour continuous skilled nursing and personal care (and was staffed with trained medical personnel) or if s/he was living in a correctional facility. Institutions include:

NURSING HOMES -

An institution that provides 24-hour continuous skilled nursing and other services to people who need nursing and personal services as inpatients.

OTHER LONG-TERM HEALTH CARE INSTITUTIONS (**MUST PROVIDE 24-HOUR SKILLED NURSING CARE**) -

An institution other than a nursing home that provides 24-hour continuous skilled nursing care for patients, regardless

of age, who have chronic diseases or disabilities, and who require preventative, diagnostic, therapeutic, and supportive services over long periods of time. Long term health care may call on a variety of health care professionals (such as physicians, nurses, physical therapists, and social workers) as well as non-professionals (family, others) and may be delivered in a health care or other institution.

OTHER NON-HEALTH CARE INSTITUTIONS -

This includes homes for juvenile delinquents, and jails or prisons.

RE76E

LEGAL GUARDIAN --

An adult who has been given the legal right and responsibility by a court to control and care for a minor child (a person under 18 years of age). The guardian may also be charged with the legal responsibility of the minor child's estate (i.e., property). The adult has legal authority to make personal decisions for the child, including responsibility for his physical, medical and educational needs. A legal guardian will be under the supervision of the court and will be required to appear in court to give periodic reports about the status of the child and its estate.

For the purposes of this study, a legal guardian cannot be deceased.

RE82

USUAL YEAR-ROUND PLACE OF RESIDENCE --

The place where person lives during the majority of a calendar year.

RESIDENCE ONLY DURING SCHOOL YEAR --

Person lives at this household only during the months s/he is attending school and lives elsewhere when not attending school.

SOME OTHER ARRANGEMENT --

This category covers living situations not covered by the above two categories. For example, a child's divorced parents have joint custody of the child and the child lives 50% of the time with his/her mother at one residence and the other 50% of the time with his/her father at a different residence.

RE83

PRIMARY RESPONSIBILITY --

The person who is most often responsible for the health and health care for the person being asked about. This includes making sure the person being asked about receives all need health care (doctor visits, dental visits, takes medications, etc.) and paying for that health care.

RE97

MARRIED --

Refers to legal marriage. This includes common law marriages in states where common law marriages are recognized (i.e., if state law considers them married, we consider them married).

WIDOWED --

Spouse is deceased.

DIVORCED --

Legal cancellation of marriage.

SEPARATED --

Legal or informal separation due to marital discord. It is necessary to probe further when a person is reported as 'separated' -- if the spouse is absent for reasons other than marital discord, the 'married' category applies.

NEVER MARRIED --

Person has never been LEGALLY married. If the person has had informal unions in the past but has never had a legal marriage, s/he is included in this category even if s/he considered themselves as living together as married partners.

If the respondent asks what is meant by marriage, tell him or her that we are only interested in LEGAL married status for this question. However, accept what the respondent tells you here without attempting to reconcile the response with information given previously concerning the marital status of the person. For example, if a respondent tells you here that he is married, but when you collected relationship information he told you that the woman he is living with is his 'partner', you would code him here as married and continue to the next person in the RU without questioning his response. An answer indicating that an RU member is 'single' or 'not married' should be probed to determine if s/he has been married in the past or not.

RE103

REGULAR SCHOOL --

A school that advances a person toward an elementary or high school diploma, or a college/university or professional school (such as law, medicine, dentistry) degree.

Regular school INCLUDES graded public, private, and parochial schools, colleges, universities, graduate and professional schools, seminaries where a Bachelor's degree is offered, junior colleges specializing in skill training, colleges of education, and nursing schools where a Bachelor's degree is offered. Count schooling in other than regular schools only if the credits obtained are acceptable in a regular school system.

If the person attended school in another country, in an un-graded school, in a 'normal school', under a tutor, or under other special circumstances, ask the respondent to give the nearest equivalent of years in regular U.S. school.

If the person attended school OUTSIDE OF THE 'REGULAR' SCHOOL SYSTEM, you will need to probe to determine if the schooling is applicable here. Use the following guidelines to determine if the schooling should be included at this question:

TRAINING PROGRAMS -

Count training received 'on the job', in the Armed Forces, or through correspondence school ONLY if it was credited toward a school diploma, high school equivalency (GED), or college degree.

VOCATIONAL, TRADE, OR BUSINESS SCHOOL -

Do NOT include secretarial school, mechanical or computer training school, nursing school where a Bachelor's degree is not offered, and other vocational trade or business schools outside the regular school system.

GENERAL EDUCATIONAL DEVELOPMENT (GED) OR HIGH SCHOOL EQUIVALENCY -

An exam certified equivalent of a high school diploma. If the person has not actually completed all four years of high school, but has acquired his/her GED (high school equivalency based on passing the GED exam), count this as you would a high school graduate and code 'TWELFTH GRADE (HIGH SCHOOL DIPLOMA)'.

ADULT EDUCATION -

Adult education classes should NOT be included as regular school unless such schooling has been counted for credit in a regular school system. If a person has taken adult education classes but NOT FOR CREDIT, these classes should not be counted as regular school. Adult education courses given in a public school building are part of regular schooling only if their completion can advance a person toward an elementary school certificate, a high school diploma (or GED), or college degree.

NURSING EDUCATION -

Education for nurses and nursing related fields can vary. If there are questions from the respondent, please use the following guidelines. The CNA is a vocational training program that lasts usually 6-9 months and is not a degree—select the grade/level completed at the last regular school. The LPN and LVN programs usually include a "diploma" or "certification" after one year's vocational training; select the most appropriate category under the heading for "College:" and code the "Other Degree" at the follow-up question. The RN is a degree program from either a nursing school (usually a 3 year program equivalent to 3 years of college and equivalent

to more than an associate degree) or a community college or college/university program that can either be at the associates, bachelors, masters, or PhD levels—select the most appropriate category under the heading for “College:” and code the appropriate degree at the follow-up question.

GRADE OR YEAR --

For this study, we have classified grades 1 through 8 as ELEMENTARY SCHOOL, and grades 9 through 12 as HIGH SCHOOL. However, you should note that the final grade of elementary school may be anywhere from grade 5 to grade 8, depending on the school system. So, if the respondent says the person you are asking about completed elementary school, probe to determine what grade that represents.

Completing a given grade in school should be counted as the number of years it NORMALLY takes to complete that grade level of education, regardless of how many years it actually took the person to finish. This means that for persons who skipped or repeated grades in elementary school, you will enter the highest grade completed REGARDLESS of the number of years they were in school. This rule is true for elementary school through high school and is especially relevant to college. For example, if the person you are asking about is reported as having a ‘Bachelor’s Degree’, it should be coded as ‘Fourth Year (BACHELOR’S DEGREE)’ regardless of how many years it took him/her to receive it. Code ‘Five or More Years (GRADUATE DEGREE)’ should be entered only if the person has completed one or more years of graduate or professional school.

For persons still in school, be sure to report the highest grade/level completed. For example, a person currently in the 10th grade probably completed the 9th grade.

RE104

HAVE HIGH SCHOOL DIPLOMA --

A certificate that verifies that a person has successfully completed the required courses of a high school curriculum. By ‘have a high school diploma’, we mean did the person graduate from high school rather than literally do they have the document bearing record of graduation.

PASSED GED --

A GED (general educational development) is an exam certified as the equivalent to attaining a high school diploma.

RE105

BACHELOR’S DEGREE --

An educational degree given by a college or university to a person who has completed a four-year course or its equivalent in the humanities or related studies (B.A.) or in the sciences (B.S.).

MASTER'S DEGREE --

An educational degree given by a college or university to a person who has completed a prescribed course of graduate study in the humanities or related studies (M.A.) or in the sciences (M.S.). It ranks above a bachelor's degree and below a doctorate degree and usually takes two years to complete.

DOCTORATE DEGREE --

The highest educational degree given by a college or university to a person who has completed a prescribed course of advanced graduate study. Examples include a Doctor of Philosophy (Ph.D.), Doctor of Laws (J.D.), Doctor of Medicine (M.D.), etc.

NO DEGREE --

If the person has some years of college, but has not yet obtained an educational degree, code 'NO DEGREE'. For example, if the person is in his/her last term towards earning a Bachelor's degree, code 'NO DEGREE'.

OTHER --

If the person obtained an educational degree other than a Bachelor's, Master's, or Doctorate degree, code 'OTHER'. A high school degree or GED is NOT considered an educational degree for this question.

RE108
RE108OV

PART-TIME --

A person is considered to be attending school part-time if s/he is carrying less than a full load of class hours in a semester or quarter.

FULL-TIME --

A person is considered to be attending school full-time if s/he is carrying a full load of class hours in a semester or quarter.

RJ01A

MAIN JOB/BUSINESS --

If only one current job or business, that job/business is the main one. If more than one current job or business, the respondent should designate as main, the job he/she considers the most important or the one worked the most hours. The main job is not necessarily the job held the longest.

JOB --

A definite arrangement for regular work every week or month, for pay or other compensation (e.g., profits, anticipated profits, or pay in kind, such as room and board). A job may also be a formal arrangement with one or more employers to work on a continuing basis for a specified number of hours per week or days per month, but on an irregular schedule during the specified week or month.

BUSINESS --

A business exists when one or more of the following conditions are met: (1) Machinery or equipment of substantial value is in use in conducting business, (2) an office, store or other place of business is maintained, or (3) the business is advertised by listing in the classified section of the phone book, displaying a sign, distributing cards or leaflets, or any other methods which publicize that the work or service is offered to clients.

EM01
EM02
EM03
EM04

JOB FOR PAY --

Paid work for wages, salary, commission, or pay 'in kind'. Examples of 'pay in kind' include meals, living quarters, or supplies provided in place of wages. This definition of employment INCLUDES work in the person's own business, professional practice, or farm, paid leaves of absence (including vacations and illnesses), and work without pay in a family business or farm run by a relative. This definition EXCLUDES unpaid volunteer work (such as for a church or charity), unpaid leaves of absences, temporary layoffs (such as a strike), and work around the house.

JOB --

A definite arrangement for regular work every week or month, for pay or other compensation (e.g., profits, anticipated profits, or pay in kind, such as room and board). A job may also be a formal arrangement with one or more employers to work on a continuing basis for a specified number of hours per week or days per month, but on an irregular schedule during the specified week or month.

BUSINESS --

A business exists when one or more of the following conditions are met: (1) Machinery or equipment of substantial value is in use in conducting business, (2) an office, store or other place of business is maintained, or (3) the business is advertised by listing in the classified section of the phone book, displaying a sign, distributing cards or leaflets, or any other methods which publicize that the work or service is offered to clients.

RJ07
RJ08
RJ08A
EM17
EM26
EM39
EM52
EM69
EM81
EM113

EM114

HEALTH INSURANCE --

Health benefits coverage, paid in whole or in part by the employer, providing employees with health-related benefits. Coverage may also include family members of the employee. A health benefits plan may include the following: hospitalization, major medical, surgical, prescriptions, dental, and vision.

RJ10

JOB ENDED --

Voluntary or involuntary termination of employment based on the completion or cancellation of a predetermined task or work order. For example, construction workers may no longer be employed due to the fact that a specific project has been completed and no subsequent projects have begun.

BUSINESS DISSOLVED/SOLD --

Voluntary or involuntary cessation of operations by the owners of the business.

RETIRED --

Voluntary termination of employment usually the result of reaching a specified age and tenure. Also include situations in which the person is no longer seeking main employment due to a retirement decision.

ILLNESS OR INJURY --

Inability to work due to impairments, or physical or mental health problems. The impairment or problem should be of such severity that it incapacitates the individual and prevents him/her from doing any kind of gainful employment.

LAID OFF --

Persons are on layoff if they are waiting to be recalled to a job from which they were temporarily separated for business-related reasons, such as temporary drops in demand, business downturns, plant remodeling, material shortages, and inventory taking. They must have either been given a date to report back to work or, if not given a date, must expect to be recalled to their job within six months.

QUIT TO HAVE A BABY --

Pregnant RU member voluntarily terminates employment due to the birth of her child. If the RU member quits to take care of an adopted child, code as 'Quit to Take Care of Home or Family'.

QUIT TO GO TO SCHOOL --

RU member is no longer employed in order to attend classes at any kind of public or private school, including trade or vocational schools in which students receive no compensation in money or kind, or only minimal educational stipends (fellowship, scholarship).

QUIT TO TAKE CARE OF HOME OR FAMILY --

This answer category includes cases where an RU member ceases employment in order to be in the household to take care of household duties, children, and/or spouse. It also includes cases where an RU member may quit in order to be available to care for another family member who is ill, either in the RU member's home or elsewhere.

QUIT BECAUSE WANTED TIME OFF --

Voluntarily out of the labor force because of a desire for time off.

QUIT TO TAKE ANOTHER JOB --

Voluntary termination of employment resulting from acceptance of other employment opportunities.

UNPAID LEAVE --

An uncompensated leave of absence from a job. The absence must be at least one work week or longer.

EM05
EM11
EM18
EM27
EM40
EM53
EM70
EM82
OE27

SELF-EMPLOYED --

Individuals working for profit or fee in a business or farm they own. The business or farm may be incorporated or unincorporated.

EM77
EM78
EM89

RETIRED --

Voluntary termination of employment usually the result of reaching a specified age and tenure. Also include situations in which the person is no longer seeking main employment due to a retirement decision.

EM93

MORE THAN ONE LOCATION --

This question pertains to the establishment which directly employs (pays) the RU member. A direct employer may have facilities at more than one location. However, if the employer is a franchise of a national or international firm with only one location, then the employer is considered not to have facilities in more than one location.

EM94

INCORPORATED --

Act which makes a business a taxable entity through establishment of a charter and the satisfaction of all state and/or federal regulations. Incorporated businesses act through its officers as a distinct entity, with by-laws and publicly or privately held stock.

EM95

SOLE PROPRIETORSHIP --

Unincorporated business owned by a single individual, needing only a business license to operate.

PARTNERSHIP --

Unincorporated business owned by two or more individuals, needing only a business license to operate.

EM96

PRIVATE COMPANY, INDIVIDUAL, OR ORGANIZATION --

Employees of an organization whose operations are owned by private individuals and not a governmental entity.

FEDERAL GOVERNMENT --

Federal employees include individuals working for any branch of the federal government, as well as elected officials and civilian employees of the armed forces.

STATE GOVERNMENT --

State employees include individuals working for agencies of state governments, as well as paid state officials, the state police, and employees of state universities and colleges.

LOCAL GOVERNMENT --

Local government employees include individuals employed by cities, towns, counties, parishes, and other local areas, as well as employees of city-owned businesses, such as electric power companies, water and sewer services, etc.

ARMED FORCES --

Non-civilian members of any of the armed services of the federal government (Army, Navy, Air Force, Coast Guard, Marines).

FOREIGN (NON U.S.) GOVERNMENT --

Individuals who work for a government other than the U.S. This includes all levels of government as long as it is non-U.S.

Do not use this answer category for individuals working at some level of non-foreign government, but who work outside the boundaries of the U.S. For example, a person working for the U.S. State Department in Africa.

EM101
EM101OV1

JOB ENDED --

Voluntary or involuntary termination of employment based on the completion or cancellation of a predetermined task or work order. For example, construction workers may no longer be employed due to the fact that a specific project has been completed and no subsequent projects have begun.

RETIRED --

Voluntary termination of employment usually the result of reaching a specified age and tenure. Also include situations in which the person is no longer seeking main employment due to a retirement decision.

ILLNESS OR INJURY --

Inability to work due to impairments, or physical or mental health conditions. The impairment or condition should be of such severity that it incapacitates the individual and prevents him/her from doing any kind of gainful employment.

LAID OFF --

Persons are on layoff if they are waiting to be recalled to a job from which they were temporarily separated for business-related reasons, such as temporary drops in demand, business downturns, plant remodeling, material shortages, and inventory taking. They must have either been given a date to report back to work or, if not given a date, must expect to be recalled to their job within six months.

QUIT TO HAVE A BABY --

Pregnant RU member voluntarily terminates employment due to the birth of her child. If the RU member quits to take care of an adopted child, code as 'Quit to Take Care of Home or Family'.

QUIT TO GO TO SCHOOL --

RU member is no longer employed in order to attend classes at any kind of public or private school, including trade or vocational schools in which students receive no compensation in money or kind, or only minimal educational stipends (fellowship, scholarship).

QUIT TO TAKE CARE OF HOME OR FAMILY --

This answer category includes cases where an RU member ceases employment in order to be in the household to take care of household duties, children, and/or spouse. It also includes cases where an RU member may quit in order to be available to care for another family member who is ill, either in the RU member's home or elsewhere.

QUIT BECAUSE WANTED TIME OFF --

Voluntarily out of the labor force because of a desire for time off.

QUIT TO TAKE OTHER JOB --

Voluntary termination of employment resulting from acceptance of other employment opportunities.

EM102

EM102OV1

BUSINESS DISSOLVED OR SOLD --

Voluntary or involuntary cessation of operations by the owners of the business.

RETIRED --

Voluntary termination of employment usually the result of reaching a specified age and tenure. Also include situations in which the person is no longer seeking main employment due to a retirement decision.

ILLNESS OR INJURY --

Inability to work due to impairments, or physical or mental health conditions. The impairment or condition should be of such severity that it incapacitates the individual and prevents him/her from doing any kind of gainful employment.

STOPPED/LEFT BUSINESS TO HAVE A BABY --

Pregnant RU member voluntarily terminates, sells, or leaves a business due to the birth of her child. If the RU member leaves to take care of an adopted child, code as 'Stopped/Left Business to Take Care of Home or Family'.

STOPPED/LEFT BUSINESS TO GO TO SCHOOL --

RU member terminates, sells, or leaves a business in order to attend classes at any kind of public or private school, including trade or vocational schools in which students receive no compensation in money or kind, or only minimal educational stipends (fellowship, scholarship).

STOPPED/LEFT BUSINESS TO TAKE CARE OF HOME OR FAMILY --

This answer category includes cases where an RU member terminates, sells, or leaves a business in order to be in the household to take care of household duties, children, and/or spouse. It also includes cases where an RU member may terminate, sell, or leave a business in order to be available to care for another family member who is ill, either in the RU member's home or elsewhere.

STOPPED/LEFT BUSINESS BECAUSE WANTED TIME OFF --

Voluntarily terminated, sold, or left a business because of a desire for time off.

STOPPED/LEFT BUSINESS TO TAKE OTHER JOB --

Business was voluntarily terminated, sold, or left in order to accept an alternative position of employment.

EM104
EM111

ACTUAL HOURS WORKED PER WEEK --

The number of hours actually worked during a typical work week. Hours worked will include overtime if the RU member worked overtime for most of the weeks during the reference period. The actual hours worked is often not the same as the hours on which the person's salary is based. In this question, we want the ACTUAL hours spent working on the job, whether the hours are paid or not. However, unpaid hours spent traveling to and from work are never included in hours worked per week.

EM110

PENSION/RETIREMENT PLAN --

Employment benefit which provides income payments to employees upon their retirement. Pension plans provide benefits to employees who have met specified criteria, normally age and/or length of service requirements. The two main types of pension plans are:

- defined benefit plans: Retirees receive a fixed monthly payment from their former employer, determined by years of service and average earnings.
- defined contribution: Funds available to retirees are based on their own contributions and any employer match made to an account such as a 401(k) or 403(b) plan during working years.

EM115

CHOICE OF HEALTH INSURANCE PLANS --

Many employers/establishments offer, instead of one basic plan, different types of enrollments that attempt to tailor coverage to the needs of the employee. For each enrollment type, there may be a different set of coverage provisions, a separate premium rate, and a varying proportion of total cost assumed by the employer. Plans may be called HMO, PPO, indemnity, high deductible, etc.

EM116
EM117

LABOR UNION --

An organization of wage or salary earners formed for the purpose of serving their collective interests with respect to wages, working conditions, and benefits. Participation in a labor union normally requires that the employee pay dues that may be directly deducted from their gross wages or salary.

EM126
EM126OV1

COULD NOT FIND WORK --

Unable to secure gainful employment while in an active job search.

RETIRED --

Voluntary termination of employment usually the result of reaching a specified age and tenure. Also include situations in which the person is no longer seeking main employment due to a retirement decision.

UNABLE TO WORK BECAUSE ILL/DISABLED --

Inability to work due to impairments, or physical or mental health conditions. The impairment or condition should be of such severity that it incapacitates the individual and prevents him/her from doing any kind of gainful employment.

ON TEMPORARY LAYOFF --

Persons are on temporary layoff if they are waiting to be recalled to a job from which they were temporarily separated for business-related reasons, such as temporary drops in demand, business downturns, plant remodeling, material shortages, and inventory taking. They must have either been given a date to report back to work or, if not given a date, must expect to be recalled to their job within six months.

MATERNITY/PATERNITY LEAVE --

Paid or unpaid leave of absence due to pregnancy or care for a newborn child.

GOING TO SCHOOL --

RU member is no longer employed in order to attend classes at any kind of public or private school, including trade or vocational schools in which students receive no compensation in money or kind or only minimal educational stipends (fellowship, scholarship).

TAKING CARE OF HOME OR FAMILY --

This answer category includes cases where an RU member ceases employment in order to be in the household to take care of household duties, children, and/or spouse. It also includes cases where an RU member may quit in order to be available to care for another family member who is ill, either in the RU member's home or elsewhere.

WANTED SOME TIME OFF --

Voluntarily out of the labor force because of a desire for time off.

WAITING TO START NEW JOB --

Unemployment based on the timing of the interview. The RU member has left one job, but has yet to begin work for a new employer, although the RU member has been officially hired by the second employer.

EM128

WEEKS WORKED --

If a person worked at least two and one-half days out of the week, count it as a full week."

WORK FOR PAY --

Paid work for wages, salary, commission, or pay 'in kind'. Examples of 'pay in kind' include meals, living quarters, or supplies provided in place of wages. This definition of employment INCLUDES work in the person's own business, professional practice, or farm, paid leaves of absence (including vacations and illnesses), and work without pay in a family business or farm run by a relative. This definition EXCLUDES unpaid volunteer work (such as for a church or charity), unpaid leaves of absences, temporary layoffs (such as a strike), and work around the house.

EW01

SALARIED --

Salaried employees are paid to perform a job regardless of the number of hours worked. These employees are not paid on an hourly basis and may not receive compensation for hours worked beyond 40 hours per week. In essence, there is little to no link between compensation and scheduled hours.

PAID BY THE HOUR --

Method of payment in which earnings are paid for each hour worked. Each straight-time hour is paid at the same rate and the rate is not dependent on any measure of straight-time hours worked.

PAID SOME OTHER WAY --

Other means of payment for work include being paid on commission, paid with bonuses, and payment by the day, piecework, job, or mile.

EW02

EW02OV1

BY THE DAY --

Method of payment where the period of employment for which wages are dispersed is one working day. A common example is child day care where workers may be compensated for each day worked (not on an hourly or yearly basis).

PIECEWORK --

A method of incentive wage payment where earnings are based on a constant rate of pay for each unit of output. For example, \$3.50 for each garment produced.

COMMISSION --

A method of incentive payment paid in addition to or in lieu of a base rate, based upon business created or sales confirmed. The commission period and the base rate period need not be of

the same length. For example, the commission period could be monthly, daily, or hourly.

BONUS --

Special cash payments. Sometimes bonuses are given as a reward for an employee's production in excess of a quota or for completion of a job in less than a standard time period. Bonuses may also be paid by the employer to those employees who meet certain criteria (e.g., one year of continuous employment with the establishment) or they may be lump sum payments to all employees (e.g., Christmas bonuses). Payments may be graduated according to a worker's length of service, position in the organization, or a combination of these and other criteria.

BY THE JOB/MILE --

Method of payment based on each mile driven or job completed.

EW17

HOURS WORKED PER WEEK (ON WHICH SALARY BASED) --

The number of hours worked per week on which the person's salary is based is often not the same as the hours actually worked. In this question, we want the number of hours on which the SALARY IS BASED, regardless of how many actual hours the person works during the week. Overtime hours should not be included. By definition, salaried RU members are not compensated for overtime.

EW23

EW23OV1

EW23OV2

TIPS --

Customer payment above amount owed, rendered as supplemental compensation for an employee.

BONUSES --

Special cash payments. Sometimes bonuses are given as a reward for an employee's production in excess of a quota or for completion of a job in less than a standard time period. Bonuses may also be paid by the employer to those employees who meet certain criteria (e.g., one year of continuous employment with the establishment) or they may be lump sum payments to all employees (e.g., Christmas bonuses). Payments may be graduated according to a worker's length of service, position in the organization, or a combination of these and other criteria.

COMMISSIONS --

A method of incentive payment paid in addition to or in lieu of a base rate, based upon business created or sales confirmed. The commission period and the base rate period need not be of the same length. For example, the commission period could be monthly, daily, or hourly.

HX03
HX03OV1
HX04

PROFESSIONAL ASSOCIATION --

An organization of individuals that share a professional affiliation (for example, the American Medical Association). Membership may include the right to buy health insurance through the organization or association.

SMALL BUSINESS GROUP --

A group of small businesses that band together to negotiate better deals on health insurance for their employees than they could each negotiate on their own.

UNION --

An organization of wage or salary earners formed for the purpose of serving their collective interests with respect to wages, working conditions, and benefits. Participation in a labor union normally requires that the employee pay dues that may be directly deducted from their gross wages or salary.

INSURANCE AGENT --

An individual primarily engaged in the business of selling insurance policies to the public.

INSURANCE COMPANY --

A corporation primarily engaged in the business of selling insurance policies to the public.

HMO (HEALTH MAINTENANCE ORGANIZATION) --

HMOs are a common type of insurance plan. If the respondent says s/he is or has been covered by health insurance from an HMO, accept her/his response. If the respondent needs clarification, use the definition below.

HMOs are organizations that have responsibility for providing comprehensive health care services in exchange for fixed periodic payment. With an HMO, a person must generally receive their care from HMO physicians; otherwise the expense is not covered unless the person was referred by the HMO or there was a medical emergency. With an HMO, the cost of a visit is typically covered in full or you have to pay a fixed amount of money per visit. HMOs can be sponsored by the government, medical schools, hospitals, employers, labor unions, consumer groups, insurance companies, and hospital-medical plans.

HIGH RISK POOL --

High risk pools are designed as a way to provide health insurance coverage for those who are unable to purchase medical insurance otherwise. Usually this includes individuals who have been denied health insurance coverage, typically due to a pre-existing condition.

Most states have formed their own high risk pools and they are known by different names in each state. A temporary national high risk pool program may be in effect until 2014.

PREVIOUS EMPLOYER --

Health insurance purchased for this business through any former employer. The RU member being asked about must have worked for this employer at some point in the past.

PREVIOUS EMPLOYER (COBRA) --

Health insurance purchased for this business through any former employer. The RU member being asked about must have worked for this employer at some point in the past. This health insurance must continue through COBRA.

COBRA is defined as insurance provided by a former employer. This is a federal law that allows persons without any other group health insurance to continue their employment-related coverage at group rates for 18 to 36 months after having left a job. However, the primary insured person or policyholder usually has to pay the entire premium.

STATE EXCHANGE NAME/MARKETPLACE --

This is a "new" central marketplace where people can shop for health insurance plans online, in person or by phone and access financial assistance to help pay for coverage.

HX05
HX06

MEDICARE --

A Federal health insurance program for people 65 or older and for certain persons under 65 with long-term disabilities. Almost everyone with Social Security is covered by Medicare.

Medicare consists of four parts, A, B, C, and D:

PART A -

Part A is called the Hospital Insurance Program. It helps pay for inpatient care in a hospital or in a skilled nursing facility, and for hospice care. It is available to nearly EVERYONE 65 OR OLDER.

PART B -

Part B is called the Supplementary Medical Insurance Program. It helps pay for the doctor and surgeon services, outpatient hospital services, medical equipment, and a number of other medical services and supplies.

If a person chooses this additional insurance, the monthly premium is deducted from his/her Social Security to obtain coverage for Part B of Medicare.

PART C -

Part C encompasses the Medicare Advantage plans. A Medicare Advantage Plan (like an HMO or PPO) is a health plan choice available as part of Medicare. Medicare Advantage Plans, sometimes called "Part C" or "MA Plans," are offered by private companies approved by Medicare. The plan provides all of a person's Part A (Hospital Insurance) and Part B (Medical Insurance) coverage.

PART D -

Medicare Part D coverage, also referred to as Medicare prescription drug coverage, is insurance that covers both brand-name and generic prescription drugs at participating pharmacies. Everyone with Medicare can choose this additional coverage, regardless of income and resources, health status, or current prescription expenses.

HX08

The purpose of this question is to distinguish between persons that receive Medicare because they are over 65 and persons who receive Medicare due to a condition or disability. If the person you are asking about receives Medicare because of a medical condition or disability, code '1' (Yes).

CONDITION --

A condition is a physical or mental health problem that can be identified by a health care professional by examining you and by using tests.

DISABILITY --

An inability to work or carry out roles that individuals are generally expected to be able to do because of limitations in physical or mental functioning caused by impairments, or physical or mental health conditions.

HX09

SOCIAL SECURITY --

Social Security is also known as the Old Age, Survivors and Disability Insurance program (OASDI), in reference to its three parts:

RETIREMENT BENEFITS -

The amount of the monthly benefit depends upon previous earnings and upon the age at which the person chooses to begin receiving benefits. The earliest age at which benefits are payable is 62.

DISABILITY -

A person who has worked long enough and recently enough to be covered can receive benefits upon becoming totally disabled, regardless of his or her age. The person must be unable to continue in his or her previous job and unable to adjust to other work; furthermore, the disability must be long-term (lasting or expected to last for at least one year or to

result in death). The amount of the disability benefit payable depends on the person's age and previous earnings.

SURVIVORS' BENEFITS -

If a worker covered by Social Security dies, a surviving spouse or children can receive survivors' benefits. Sometimes, survivors' benefits are available to a divorced spouse. Children cannot receive survivors' benefits after age 19 unless the child was disabled before age 22.

HX10
PR09
PR11

MEDICAID/SCHIP --

Since respondents often confuse MediCAID and MediCARE, stress to the respondent that for this question, s/he should consider MEDICAID or the State Children's health Insurance Program (SCHIP). Medicaid is often known by different names in different States, and is a Federally-assisted State-administered program. This program offers health benefits to low income persons on public assistance and, in some states, to those deemed medically needy because their incomes are only slightly above public assistance standards or because they have incurred substantial medical bills. Most SSI (Supplemental Security Income) recipients are covered by Medicaid, as are most TANF recipients and their dependents. The aged, the blind, and the disabled who are in financial need are also eligible for Medicaid.

The Children's Health Insurance Program (SCHIP) is a program which gives each state permission to offer health insurance for children, up to age 19, who are not already insured and for uninsured families with limited income and resources who earn too much to qualify for Medicaid. SCHIP is a state administered program and may be known by different names in different states.

HX12
PR19
PR21

TRICARE --

TRICARE is a health care program for active duty and retired members of the uniformed services, their families, and survivors. TRICARE offers eligible beneficiaries three choices for their health care; TRICARE Prime - where military treatment facilities are the principal source of health care; TRICARE Extra - a preferred provider option; and TRICARE Standard - a fee-for-service option (the old CHAMPUS Program). TRICARE for life covers uniformed service beneficiaries who have attained the age of 65, are Medicare-eligible, and have purchased Medicare Part B.

CHAMPVA --

CHAMPVA is a health care benefits program for the spouse or widow(er) and for the children of a veteran who is rated permanently and totally disabled due to a service-connected disability, or died of a service-connected disability, or died on active duty and the dependents are not otherwise eligible for TRICARE benefits. Under CHAMPVA, the Veterans Administration shares the cost of covered health care services and supplies with eligible beneficiaries.

HX14
PR23
PR27

INSURANCE TYPES TO INCLUDE --

Any health insurance that is fully or partially paid for by state funds (state sponsored) which provides hospital and physician benefits. This does not include Medicaid or SCHIP (which should be recorded at the Medicaid/SCHIP question) nor does it include plans which do not provide hospital and physician benefits (these plans should be recorded as state specific plans).

HX16

OTHER STATE PROGRAMS --

Any public program that provides health services administered by the state that is NOT considered Medicaid or SCHIP. **The programs we are interested in appear on the CAPI screen and vary by state. Typically, these programs DO NOT provide hospital and physician benefits. Pharmacy assistance, AIDS drug assistance and kidney disease programs are the most common types of other state specific programs.**

In addition to condition-specific programs, enrollment in a state program such as TANF, SSI, WIC, Indian Health Service (IHS), public health clinic access and VA health should also be included at this item if the respondent mentions it.

DO NOT INCLUDE medical programs that use an alternative name such as Medi-Cal, Public Assistance, SCHIP and Medical Assistance.

Selected state program definitions:

TANF --

This is a cash assistance program. TANF is known by different names in different states. Temporary Assistance for Needy Families (TANF) provides assistance and work opportunities to needy families.

SSI --

Also known as Supplemental Security Income (SSI), this federal program provides monthly cash payments in accordance with uniform, nationwide eligibility requirements to persons of all ages who are blind, disabled, or both needy and 65 years or older.

WIC --

This program provides food assistance and nutritional screening to low-income pregnant and postpartum women and their infants, as well as to low-income children up to age 5. WIC is short for the Special Supplemental Food Program for Women, Infants, and Children.

INDIAN HEALTH SERVICE (IHS) --

A Department of Health and Human Services health care program that provides medical care to eligible American Indians and Alaska Natives at IHS facilities and pays for the cost of selected health care services at non-IHS facilities.

PUBLIC HEALTH CLINIC --

Clinics that are run by state and local Public Health Departments to provide services such as prenatal care.

VETERANS' ADMINISTRATION (VA) HEALTH CARE --

This program provides health care to veterans of the Armed Forces.

HX17
HX17OV1
HX17OV2
HX17OV3
HX17OV4
HX17OV5
HX17OV6
PR35
PR37

STATE SPECIFIC PLANS --

The programs we are interested in appear on the CAPI screen and vary by state. Typically, these programs DO NOT provide hospital and physician benefits. Pharmacy assistance, AIDS drug assistance and kidney disease programs are the most common types of other state specific programs. If the respondent only mentions enrollment in TANF, SSI, WIC, Indian Health Service (IHS), public health clinic or VA, code 'NONE OF THESE' and record program at HX18.

HX18
HX18OV1
HX18OV2
HX18OV3
HX18OV4
HX18OV5
PR39
PR40
PR41
PR42

TANF (TEMPORARY ASSISTANCE FOR NEEDY FAMILIES) --

This is a cash assistance program. Temporary Assistance for Needy Families (TANF) provides assistance and work opportunities to needy families.

SSI (SUPPLEMENTAL SECURITY INCOME) --

This federal program provides monthly cash payments in accordance with uniform, nationwide eligibility requirements to persons of all ages who are blind, disabled, or both needy and 65 years or older.

WIC (WOMEN, INFANTS AND CHILDREN) --

This program provides food assistance and nutritional screening to low-income pregnant and postpartum women and their infants, as well as to low-income children up to age 5. WIC is short for the Special Supplemental Food Program for Women, Infants, and Children.

IHS (INDIAN HEALTH SERVICE) --

A Department of Health and Human Services health care program that provides medical care to eligible American Indians and Alaska Natives at IHS facilities and pays for the cost of selected health care services at non-IHS facilities.

PUBLIC HEALTH CLINIC --

Clinics that are run by state and local Public Health Departments to provide services such as prenatal care.

VA (VETERANS ADMINISTRATION) --

This program provides health care to veterans of the Armed Forces.

HX22
HX23
HX23OV1
HX24

GROUP OR ASSOCIATION --

Includes many types of organizations, but principally groups like the American Association of Retired Persons (AARP), church groups, or clubs. It also may include professional associations. These are organizations of individuals that share an interest or common characteristics or professional affiliation (for example, the American Medical Association). Membership may include the right to buy health insurance through the organization or association.

SCHOOL --

Health insurance purchased through a school that covered someone in the RU during the reference period. Any type of school applies here, whether it is a grade or high school, college, or university, trade or vocational school, public or private, etc.

INSURANCE AGENT --

An individual primarily engaged in the business of selling insurance policies to the public.

INSURANCE COMPANY --

A corporation primarily engaged in the business of selling insurance policies to the public.

HMO (HEALTH MAINTENANCE ORGANIZATION) --

HMOs are a common type of insurance plan. If the respondent says s/he is or has been covered by health insurance from an HMO, accept her/his response. If the respondent needs clarification, use the definition below.

HMOs are organizations that have responsibility for providing comprehensive health care services in exchange for fixed periodic payment. With an HMO, a person must generally receive their care from HMO physicians; otherwise the expense is not covered unless the person was referred by the HMO or there was a medical emergency. With an HMO, the cost of a visit is typically covered in full or you have to pay a fixed amount of money per visit. HMOs can be sponsored by the government, medical schools, hospitals, employers, labor unions, consumer groups, insurance companies, and hospital-medical plans.

HIGH RISK POOL --

High risk pools are designed as a way to provide health insurance coverage for those who are unable to purchase medical insurance otherwise. Usually this includes individuals who have been denied health insurance coverage, typically due to a pre-existing condition.

Most states have formed their own high risk pools and they are known by different names in each state. A temporary national high risk pool program may be in effect until 2014.

UNION --

An organization of wage or salary earners formed for the purpose of serving their collective interests with respect to wages, working conditions, and benefits. Participation in a labor union normally requires that the employee pay dues that may be directly deducted from their gross wages or salary.

ANYONE'S PREVIOUS EMPLOYER (COBRA) --

Health insurance purchased or obtained that covered an RU member during the reference period through any former employer. An RU member must have worked for this employer at some point in the past. This health insurance must continue through COBRA.

COBRA is defined as insurance provided by a former employer. This is a federal law that allows persons without any other group health insurance to continue their employment-related coverage at group rates for 18 to 36 months after having left a job. However, the primary insured person or policyholder usually has to pay the entire premium.

ANYONE'S PREVIOUS EMPLOYER (NOT COBRA) --

Health insurance purchased or obtained that covered an RU member during the reference period through any former employer. An RU member must have worked for this employer at some point in the past.

SPOUSE'S/DECEASED SPOUSE'S PREVIOUS EMPLOYER --

Health insurance purchased or obtained that covered an RU member during the reference period through a spouse's or deceased spouse's former employer. This spouse or deceased spouse must have worked for this employer at some point in the past.

SOME OTHER EMPLOYER --

Health insurance purchased or obtained from any other employer, not already asked about that covered someone in the RU during the reference period. This includes all employer types not already described above and not talked about in the Employment Section.

UNDER PLAN OF SOMEONE NOT LIVING HERE --

This includes any type of health insurance provided to an RU member during the reference period by someone who is not part of the RU. For example, if a child is covered under his mother's insurance, with whom he does not live, code this category.

STATE EXCHANGE NAME/MARKETPLACE --

This is a "new" central marketplace where people can shop for health insurance plans online, in person or by phone and access financial assistance to help pay for coverage.

OTHER SOURCE --

This includes health insurance provided to an RU member by some source not described above.

HX35A
PR06B

MEDICARE PART D -

Medicare Part D coverage, also referred to as Medicare prescription drug coverage, is insurance that covers both brand-name and generic prescription drugs at participating pharmacies. Everyone with Medicare can choose this additional coverage,

regardless of income and resources, health status, or current prescription expenses.

HX31
HX32
PR02
PR03

MEDICARE MANAGED CARE --

Medicare managed care plans are available in some areas of the country. In most managed care plans, you can only go to doctors, specialists, or hospitals on the plan's list. Plans must cover all services covered by Medicare. Some managed care plans cover extras.

HX42
HX42OV1
MC01
PR13
PR29

HMO (HEALTH MAINTENANCE ORGANIZATION) --

HMOs are organizations that have responsibility for providing comprehensive health care services in exchange for fixed periodic payment. With an HMO, a person must generally receive their care from HMO physicians; otherwise the expense is not covered unless the person was referred by the HMO or there was a medical emergency. With an HMO, the cost of a visit is typically covered in full or you have to pay a fixed amount of money per visit. HMOs can be sponsored by the government, medical schools, hospitals, employers, labor unions, consumer groups, insurance companies, and hospital-medical plans.

HX43
MC02
PR14
PR30

PRIMARY CARE DOCTOR --

A primary care doctor or provider is the person or place an individual would go to if they had a new health problem, needed preventive health care, or needed a referral to a specialist. Examples of primary care providers include general practitioners, family practitioners, pediatricians, internists, and some nurses and nurse practitioners who make decisions regarding patient care.

ROUTINE CARE --

Health care that is considered usual and customary; that is, care that is not for an emergency and not received from a specialist that a person was referred to. Routine care usually consists of the initial diagnosis and treatment of medical problems, preventive health care, etc.

HX34
HX35B
HX45
HX61
PR06
PR06C
PR16
PR32
OE09A
OE23A
OE35A

PREMIUM --

A payment required in exchange for insurance policy coverage for a specific period of time.

COPAYMENT --

A fixed sum that a beneficiary pays for health services, regardless of the actual charge (the insurer pays the rest of the actual charge). For example, the beneficiary may pay \$10 for each office visit, \$75 for each day in the hospital, and \$5 for each drug prescription.

COINSURANCE --

Similar to a co-payment except that it is defined as a percent of the total charges for the health care service. For example, a beneficiary may pay 20% of charges for a visit to the doctor or 10% of charges for a hospital stay.

DEDUCTIBLE --

The amount of money an insured person must pay 'at the front end' before the insurer will pay. For example, if you have a plan with a \$100 deductible, you would be responsible for the first \$100 of your health care bills.

HX47
HX60A
OE38B
PR34

METAL PLANS --

There are four types of health insurance plans available through the marketplace. They are Bronze, Silver, Gold and Platinum health insurance plans. They are sometimes referred to as "metal plans".

The metal level corresponds to the average percentage of essential health care expenses that the plan will pay. On average, Bronze will cover 60%, Silver 70%, Gold 80% and Platinum 90% of essential health care expenses. This isn't the same as coinsurance, in which you pay a specific percentage of the cost of a specific service. The higher the metal level (i.e. Gold and Platinum), the more the plan will pay towards your health care expenses and, therefore, the lower your out-of-pocket costs for things such as deductibles, copayments and coinsurance.

To qualify for a catastrophic plan, you must be under 30 years old OR get a "hardship exemption" because the Marketplace determined that you're unable to afford health coverage. Catastrophic health plans have a low premium but very high out-of-pocket costs.

HX48
HX48OV1
HX48OV2
HX48OV3
HX48OV4
HX48OV5
HX48OV6
HX48OV7
HX48OV8
HX48OV9
HX48OV10
HX48OV11
HX48OV12
OE10
OE10OV1
OE10OV2
OE10OV3
OE10OV4
OE10OV5
OE10OV6
OE10OV7
OE10OV8
OE10OV9
OE10OV10
OE10OV11
OE10OV12
OE10OV13
OE24
OE24OV1
OE24OV2
OE24OV3
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OE24OV5
OE24OV6
OE24OV7
OE24OV8
OE24OV9
OE24OV10
OE24OV11
OE24OV12
OE24OV13
OE37
OE37OV1
OE37OV2
OE37OV3
OE37OV4
OE37OV5
OE37OV6

OE37OV7
OE37OV8
OE37OV9
OE37OV10
OE37OV11
OE37OV12
OE37OV13

HOSPITAL AND PHYSICIAN BENEFITS (INC. COVERAGE THROUGH AN HMO) --

This category represents insurance plans that cover beneficiaries for health care services received from hospitals and physicians. Do not include dental insurance, vision insurance, etc.

DENTAL --

This type of insurance covers the costs of specified aspects of dental care, ranging from coverage of basic diagnostic, preventive, and restorative services to coverage that includes oral surgery and orthodontics.

PRESCRIPTION DRUGS --

Insurance that provides coverage for prescription drugs. Prescription drugs are those ordered by a physician or other authorized medical person through written or verbal prescription for a pharmacist to fill.

VISION --

Insurance that provides coverage for ophthalmologist, optometrist and/or optician appointments, glasses, contact lenses, or other vision corrections.

MEDICARE SUPPLEMENT/MEDIGAP --

Private insurance products that supplement Medicare insurance benefits.

LONG-TERM CARE IN A NURSING HOME --

Refers to an insurance policy that pays ONLY for a nursing home or other long term care.

Long term care does NOT include living in a 'life care center' even though long term care may be available as part of the living arrangement. If the respondent mentions a 'life care center' as a policy, record that information using the code '91' (Other) and record the name 'life care center' on the 'Specify' line. This study does not consider this coverage to be health insurance.

EXTRA CASH FOR HOSPITAL STAYS --

These plans pay a specified amount of cash for each day or week that a person is hospitalized. The cash payment is not related in any way to the person's hospital or medical bills, and can be used for purposes other than paying medical expenses. For example, the extra cash can be used to pay for child care when a parent is ill or to replace income from lost work. This study does not consider this coverage to be health insurance.

SERIOUS DISEASE OR DREAD DISEASE --

These plans are limited to only certain types of illnesses such as cancer, stroke, or heart attacks. This study does not consider this coverage to be health insurance.

DISABILITY --

This kind of insurance pays all or part of an employee's salary (and possibly medical care costs) if the employee becomes unable to work due to physical or mental disability. The study does not consider this coverage to be health insurance.

WORKERS' COMPENSATION --

A system, required by law, of compensating workers injured or disabled in connection with work. This system establishes the liability of an employer for injuries or sickness that arise over and in the course of employment. The liability is created without regard to the fault or negligence of the employer. The benefits under this system generally include hospital and other medical payments and compensation for loss of income. This study does not consider this coverage to be health insurance.

ACCIDENT --

Pays for medical services related to injuries of accidental nature. Since the coverage is limited to accidents, such as car accidents, the study does not consider this coverage to be health insurance.

HX49
HX51
HX54
OE11
OE25
OE38

INSURANCE COMPANY --

A corporation primarily engaged in the business of furnishing insurance protection for the public.

HMO (HEALTH MAINTENANCE ORGANIZATION) --

HMOs are organizations that have responsibility for providing comprehensive health care services in exchange for fixed periodic payment. With an HMO, a person must generally receive their care from HMO physicians; otherwise the expense is not covered unless the person was referred by the HMO or there was a medical emergency. With an HMO, the cost of a visit is typically covered in full or you have to pay a fixed amount of money per visit. HMOs can be sponsored by the government, medical schools, hospitals, employers, labor unions, consumer groups, insurance companies, and hospital-medical plans.

HX60

PLAN LETTER --

Medigap insurance is designed to supplement coverage offered under the Medicare program. Medigap policies sold after 1991 are assigned a letter A through L. These letters indicate what kind of coverage the Medigap policy offers.

HX63A
OE09B
OE23B
OE35B

ANNUAL DEDUCTIBLE --

The amount you must pay out-of-pocket for covered health services in a calendar year before the insurance company begins to pay for your health care costs.

This is different from the yearly out-of-pocket maximum which is the highest amount your health insurance company requires you to pay towards the cost of your health care.

HX63B
OE09C
OE23C
OE35C

HEALTH SAVINGS ACCOUNTS (HSAs) --

An account that is used to pay for medical expenses not covered by one's insurance plan. HSAs require a companion high deductible insurance policy. Contributions are made into the account by the individual or the individual's employer. The contributions are invested over time and can be used to pay for qualified medical expenses.

HSAs are different from Flexible Spending Accounts in that HSA balances can roll over from year to year and money in a Flexible Spending Account must be spent by the end of the plan year or you lose it. Flexible Spending Account can only be opened when offered by your employer, and you don't need to have a high-deductible health insurance plan or any type of health insurance plan.

Do **not** include participation in a Medicare Medical Savings Account which is associated with a Medicare Advantage Plan.

HX66
HX66OV1
HX66OV2
HX66OV3
HX66OV4
HX66OV5
HX66OV6
HX66OV7

HX66OV8
HX66OV9
HX66OV10
HX66OV11
HX66OV12
HX66OV13
HX66OV14
HX66OV15
HX66OV16
HX78
HX78OV1
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HX78OV6
HX78OV7
HX78OV8
HX78OV9
HX78OV10
HX78OV11
HX78OV12
HX78OV13
HX78OV14
HX78OV15
HX78OV16

OBTAINED THROUGH --

UNION -

An organization of wage or salary earners formed for the purpose of serving their collective interests with respect to wages, working conditions, and benefits. Participation in a labor union normally requires that the employee pay dues that may be directly deducted from their gross wages or salary.

PRIVATE EMPLOYER -

This category includes insurance obtained through employment with a private company, individual or organization. These are organizations whose operations are owned by private individuals and not a government entity.

PUBLIC EMPLOYER (FEDERAL, STATE OR LOCAL GOVERNMENT) -

This category includes insurance obtained through employment with a public employer, such as the federal, state or local government.

FEDERAL employees include individuals working for any branch of the federal government, as well as elected officials and civilian employees of the armed forces.

STATE employees include individuals working for agencies of state governments, as well as paid state officials, the state police, and employees of state universities and colleges.

LOCAL employees include individuals employed by cities, towns, counties, parishes, and other local areas, as well as employees of city-owned businesses, such as electric power companies, water and sewer services, etc.

MEDICARE --

A Federal health insurance program for people 65 or older and for certain persons under 65 with long-term disabilities. Almost everyone with Social Security is covered by Medicare.

Medicare has of three parts, A, B and D:

PART A --

Part A is called the Hospital Insurance Program. It helps pay for inpatient care in a hospital or in a skilled nursing facility, and for hospice care. It is available to nearly EVERYONE 65 OR OLDER.

PART B --

Part B is called the Supplementary Medical Insurance Program. It helps pay for the doctor and surgeon services, outpatient hospital services, medical equipment, and a number of other medical services and supplies.

If a person chooses this additional insurance, the monthly premium is deducted from his/her Social Security to obtain coverage for Part B of Medicare.

PART D -

Medicare Part D coverage, also referred to as Medicare prescription drug coverage, is insurance that covers both brand-name and generic prescription drugs at participating pharmacies. Everyone with Medicare can choose this additional coverage, regardless of income and resources, health status, or current prescription expenses.

MEDICAID/SCHIP --

Since respondents often confuse MediCAID and MediCARE, stress to the respondent that for this question, s/he should consider MEDICAID or the State Children's health Insurance Program (SCHIP).

Medicaid is often known by different names in different States, and is a Federally-assisted State-administered program. This program offers health benefits to low income persons on public assistance and, in some states, to those deemed medically needy because their incomes are only slightly above public assistance standards or because they have incurred substantial medical bills. Most SSI (Supplemental Security Income) recipients are covered by Medicaid, as are most TANF recipients and their dependents. The aged, the blind, and the disabled who are in financial need are also eligible for Medicaid.

The Children's Health Insurance Program (SCHIP) is a program which gives each state permission to offer health insurance for children, up to age 19, who are not already insured and for uninsured families with limited income and resources who earn too much to qualify for Medicaid. SCHIP is a state administered program and may be known by different names in different states.

TRICARE --

TRICARE is a health care program for active duty and retired members of the uniformed services, their families, and survivors. TRICARE offers eligible beneficiaries three choices for their health care; TRICARE Prime - where military treatment facilities are the principal source of health care; TRICARE Extra - a preferred provider option; and TRICARE Standard - a fee-for-service option (the old CHAMPUS Program). TRICARE for life covers uniformed service beneficiaries who have attained the age of 65, are Medicare-eligible, and have purchased Medicare Part B.

CHAMPVA --

CHAMPVA is a health care benefits program for the spouse or widow(er) and for the children of a veteran who is rated permanently and totally disabled due to a service-connected disability, or died of a service-connected disability, or died on active duty and the dependents are not otherwise eligible for TRICARE benefits. Under CHAMPVA, the Veterans Administration shares the cost of covered health care services and supplies with eligible beneficiaries.

VA OR MILITARY HEALTH CARE --

This program provides health care to veterans of the Armed Forces.

PURCHASED DIRECTLY FROM --

GROUP OR ASSOCIATION -

Includes many types of organizations, but principally groups like the American Association of Retired Persons (AARP), church groups, or clubs. It also may include professional associations. These are organizations of individuals that share an interest or common characteristics or professional affiliation (for example, the American Medical Association). Membership may include the right to buy health insurance through the organization or association.

INSURANCE AGENT -

An individual primarily engaged in the business of selling insurance policies to the public.

INSURANCE COMPANY -

A corporation primarily engaged in the business of selling insurance policies to the public.

HEALTH MAINTENANCE ORGANIZATION (HMO) --

HMOs are organizations that have responsibility for providing comprehensive health care services in exchange for fixed periodic payment. With an HMO, a person must generally receive their care from HMO physicians; otherwise the expense is not covered by the HMO unless the person was referred by the HMO or there was a medical emergency. With an HMO, the cost of a visit is typically covered in full or you have to pay a fixed amount per visit. HMOs can be sponsored by the government, medical schools, hospitals, employers, labor unions, consumer groups, insurance companies, and hospital-medical plans.

OTHER GOVERNMENT SPONSORED PROGRAM --

Any health insurance that is fully or partially paid for by state funds (state sponsored) which provides hospital and physician benefits. This does not include Medicaid (which should be recorded at the Medicaid question) nor does it include plans which do not provide hospital and physician benefits (these plans should be recorded as state specific plans).

OTHER PUBLIC PROGRAMS --

TANF -

This is a cash assistance program. Temporary Assistance for Needy Families (TANF) provides assistance and work opportunities to needy families.

SSI -

Also known as Supplemental Security Income (SSI), this federal program provides monthly cash payments in accordance with uniform, nationwide eligibility requirements to persons of all ages who are blind, disabled, or both needy and 65 years or older.

STATE SPECIFIC PLANS -

The programs we are interested in can vary by state. Typically, these programs DO NOT provide hospital and physician benefits. Pharmacy assistance, AIDS drug assistance and kidney disease programs are the most common types of other state specific programs. Other examples include: Temporary Aid For Needy Families (TANF), Supplemental Security Income (SSI), Women, Infants, and Children (WIC), Indian Health Service (HIS), public health clinics and Veterans' Administration (VA) health care.

HP01

GENERAL HEALTH COVERAGE --

Health insurance that covers a broad range of health care services, including those caused by illnesses, disease, etc., as well as, injuries and accidents.

HP09
HP10
HP11A
HP11B

POLICYHOLDER --

The person in whose name the policy is written or the primary insured person.

HP11

POLICYHOLDER --

The person in whose name the policy is written or the primary insured person.

If respondent cannot identify just one policyholder, select the oldest person who has this coverage.

HP12
HP12OV1

EMPLOYMENT --

Paid work for wages, salary, commission, or pay 'in kind'. Examples of 'pay in kind' include meals, living quarters, or supplies provided in place of wages. This definition of employment INCLUDES work in the person's own business, professional practice, or farm, paid leaves of absence (including vacations and illnesses), and work without pay in a family business or farm run by a relative. This definition EXCLUDES unpaid volunteer work (such as for a church or charity), unpaid leaves of absences, temporary layoffs (such as a strike), and work around the house.

CURRENTLY EMPLOYED --

Person is employed at this establishment as of date of the interview.

PREVIOUSLY EMPLOYED --

Person is not employed as of date of the interview, but has been employed at this establishment in the past.

RETIRED --

Voluntary termination of employment usually the result of reaching a specified age and tenure. Also include situations in which the person is no longer seeking main employment due to a retirement decision.

DECEASED --

The person is no longer living.

HP13

FEDERAL GOVERNMENT --

Federal employees include individuals working for any branch of the federal government, as well as elected officials and civilian employees of the armed forces.

HP14

OE14

OE16

COBRA --

Insurance provided by a former employer. This is a federal law that allows persons without any other group health insurance to continue their employment-related coverage at group rates for 18 to 36 months after having left a job. However, the primary insured person or policyholder usually has to pay the entire premium.

HP15

HP17

OE06

OE08A

OE20

OE22A

OE32

OE34A

OE44

OE47

DEPENDENT --

A person who is covered by an insurance policy purchased or obtained by another individual (the policyholder).

CL03

THIS SCREEN CONTAINS INSTRUCTIONS FOR FILLING OUT MPC AUTHORIZATION FORMS, SIGNATURE RULES, AND LEAVING AFs WITH RESPONDENTS.

Prepare one Authorization Form for EACH person-provider pair displayed by CAPI. Use a black pen. If no preprinted form is available, use a blank MPC AF from your bulk supplies.

Instructions for filling out authorization forms:

1. Section A: Check or record the name, address, and telephone number of the hospital or provider using the address information displayed by CAPI. If a preprinted AF is used and a patient or eligible proxy signer indicates any preprinted information is incorrect, re-write the AF using a blank MPC AF form. Do not include any missing or unknown information, such as 'NMN' or 'Girl #1'.

2. Section B: Make sure patient or proxy signer reads the authorization form statement, including footnotes. If the signer cannot read, read the statement to him/her.
3. Section C: Check or record the patient's name and date of birth. If any corrections are necessary to the preprinted information, re-write the AF using a blank MPC AF form. Ask the patient or proxy signer if medical records may be filed under another name and record this information in Item 3.
4. 'FIELD USE ONLY' SECTION: Record the RU ID, PROVID (4 digits) and PID (3 digits) in the appropriate spaces. All are displayed by CAPI. DO NOT USE THE RU MINI LABEL ON AUTHORIZATION FORMS. Record your Interviewer ID (FIID) in the bottom right corner.
5. The patient and/or proxy signer needs to sign and date the form in Sections D & E, using the following guidelines:

IF PATIENT IS:	THEN FORM SHOULD BE SIGNED BY:
a. Age 18 or older	Only patient for Items 4 and 5, unless one of d-f applies
b. Age 14 through 17	Patient and Parent or guardian (Items 4-9)
c. Age 13 or younger	Parent (Items 6-9)
d. Unable to sign but able to make mark	Patient and Witness (Items 6-9)
e. Deceased	Proxy (Items 6-9)
f. Unable to sign name or make mark	Proxy (Items 6-9)

6. Section E: If proxy signer, make sure the 'reason for proxy' is marked and the relationship to person is completed.

IMPORTANT: All Authorization Forms must be signed and dated. If a proxy signs (Item 6) then Item 7 (Date Signed), Item 8 (Signer's Relationship to Patient) and Item 9 (Reason for Proxy Signature) must be completed.

For each absent person who needs to sign an authorization form, prepare an AF with Sections A, C, and 'Field Use Only' filled out. CIRCLE the item numbers on the lines corresponding to Item 3 (Other Name) and the appropriate lines for patient and/or proxy signature and date (Items 4-9) to indicate which items need to be completed by the absentee signer(s).

Insert the prepared authorization form into the back pocket of the MPC Authorization Form Booklet. Make arrangements for authorization form follow up either by mail or an in-person visit. If possible, make an

appointment to return to the RU within 10 days to pick up any outstanding forms. If the AFs are to be returned by mail, be sure to include a postage-paid envelope with the materials left with the MPC Authorization Form Booklet.

CL04
CL04OV1
CL04OV2

SIGNED, NO PROBLEM: With this code, you are required to enter the date on which the authorization form was signed and the MPC authorization form number.

SIGNED, WITH PROBLEM: Use this code if there is a problem with a signed form. Describe the problem as well as enter the date the authorization form was signed and the MPC authorization form number.

LEFT WITH RESPONDENT: Use this code if the eligible RU member is not present. Leave the Authorization Form Booklet and prepared authorization form with the respondent to give to that person. No additional information is required in CAPI with this authorization form status.

MAILED TO RESPONDENT: Use this code if the eligible RU member is a student away at school or is away for an extended period of time. Mail the Authorization Form Booklet and completed authorization form to that person. No additional information is required in CAPI with this code.

REFUSED: Use this code if the RU member refuses to sign the authorization form. A follow-up question as to the reason for the refusal is asked.

If possible, leave the Authorization Form Booklet and prepared authorization form with the respondent or RU member in case he or she reconsiders.

OTHER: Use this code if none of the above authorization form status codes apply. Specify the reason for using this code. Leave the Authorization Form Booklet and prepared authorization form with the RU member or respondent.

CL31

THIS SCREEN CONTAINS INSTRUCTIONS FOR FILLING OUT PHARMACY AUTHORIZATION FORMS, SIGNATURE RULES, AND LEAVING AFs WITH RESPONDENTS.

Prepare one authorization form for EACH person-pharmacy pair displayed by CAPI. If the preprinted Pharmacy authorization form cannot be located, use a blank AF from your bulk supplies.
Instructions for filling out Pharmacy authorization forms:

1. Section A: Check or record the name, address, and telephone number information for the pharmacy. This information is displayed by CAPI. If the person or eligible proxy signer indicates any preprinted information is incorrect, re-write the AF using a blank Pharmacy AF form. Do not include any missing or unknown information such as 'NMN' or 'Girl #1'.
2. Section B: Make sure the person or proxy signer reads the authorization form statement, including footnotes. If the signer cannot read, read the statement to him/her.
3. Section C: Check or record the person's name and date of birth. If any corrections are necessary to the preprinted information, re-write the AF using a blank Pharmacy AF form. Ask the person or proxy signer if prescription records may be listed under another name and record this information in Item 3.
4. 'FIELD USE ONLY' Section: Record the RUID, PHARID (4 digits) and PID (3 digits) in the appropriate spaces. All are displayed by CAPI. DO NOT USE RU MINI LABELS ON AUTHORIZATION FORMS. Record your interviewer ID (FIID) in the bottom right corner.
5. The person and/or proxy needs to sign and date the form in Sections D & E using the following guidelines:

IF PERSON IS:	THEN FORM SHOULD BE SIGNED BY:
a. Age 18 or older	Patient only (Items 4 and 5, unless one of d-f applies)
b. Age 14 through 17	Patient and parent or guardian (Items 4-9)
c. Age 13 or younger	Parent or guardian (Items 6-9)
d. Unable to sign name but able to make mark	Patient and witness (Items 6-9)
e. Deceased	Proxy (Items 6-9)
f. Unable to sign name or make mark	Proxy (Items 6-9)

Section E: If proxy, make sure reason for proxy is marked and relationship to person is completed.

IMPORTANT: All authorization forms MUST BE signed and dated. If a proxy signs (Item 6), then Item 7 (Date Signed), Item 8 (Signer's Relationship to Person), and Item 9 (Reason for Proxy Signature) must be completed.

For each absent person who needs to sign a Pharmacy authorization form, prepare a Pharmacy AF with sections A, C, and 'FIELD USE ONLY' filled out. CIRCLE the item numbers on the lines corresponding to Item 3 (Other Names) and the appropriate lines for person and/or proxy signature and date (Items 4-9) to indicate which items need to be completed by absentee signer(s).

Insert the prepared authorization form(s) into the pocket of the Pharmacy Authorization Form Booklet. Make arrangements for authorization form follow-up either by mail or an in-person visit. If possible, make an appointment to return to the RU within 10 days to pick up any outstanding authorization forms. If the AFs are to be returned by mail, be sure to include a postage-paid envelope with the other materials left with the Authorization Form Booklet.

CL32
CL32OV1
CL32OV2

SIGNED, NO PROBLEM: With this code, you are required to enter the date on which the authorization form was signed and the Pharmacy authorization form number.

SIGNED, WITH PROBLEM: Use this code if there is a problem with a signed form. You are required to describe and enter the Pharmacy authorization form number.

LEFT WITH RESPONDENT: Use this code if the eligible RU member is not present. Leave the Authorization Form Booklet and prepared authorization form with the respondent to give to that person. No additional information is required in CAPI with this authorization form status.

MAILED TO RESPONDENT: Use this code if the eligible RU member is a student away at school or is away for an extended period of time. Mail the Authorization Form Booklet and prepared authorization form to that person. No additional information is required in CAPI with this code.

REFUSED: Use this code if the RU member refuses to sign the authorization form. A follow-up question as to the reason for the refusal is asked.

If possible, leave the Authorization Form Booklet and prepared authorization form with the respondent or RU member in case he or she reconsiders.

OTHER: Use this code if none of the above authorization form status codes apply. Specify the reason for using this code. Leave the Authorization Form Booklet and prepared authorization form with the RU member or respondent.

CL34A

CL34B

Having the last 4 digits of your social security number will allow MEPS to link the information you provided about (yourself/NAME) with health claims-related records from the Centers for Medicare and Medicaid Services. The Medicare claims data can help MEPS identify ways to improve the survey and reduce the amount of time the interview takes.

CL35

Prepare a self-administered questionnaire (SAQ) entitled, 'A Survey of Your Health Opinions' for each key member of the RU who is at least 18 years old and is a key member of the RU on the date of the Round 2 or 4 interview. This information is displayed by CAPI. Use the following guidelines:

- Record the name of the person, the PID, the date of birth and the current date.

SAQs may be completed either before you leave the RU, or later and returned by mail. Be sure to leave a prepared SAQ with the respondent for each eligible key RU member who is not available at the time of the interview. Outstanding SAQs may be collected during a follow up visit ONLY IF you will be returning to collect Authorization Forms.

CL38

In Round 2 or 4, every key RU member who was 18 years of age or older and Part of the RU on the Round 2 or 4 interview date was asked to complete A Survey of Your Health and Health Opinions.

Persons requested to complete this survey may have returned the survey while the interviewer was in the household or some may have preferred to complete it late and mail it back to the home office.

For each person displayed on the CAPI roster, an SAQ was either not collected at the time of the Round 2 or 4 interview or was not received by the home office. For these people, we would like to collect the SAQ now.

If the respondent or eligible person does not recall the SAQ, show an example to help refresh his/her memory. If the respondent or eligible person mentions that the SAQ was lost or misplaced, distribute a blank SAQ to each person whose name is displayed on the CAPI screen (or has mentioned that a new SAQ is needed). If the person is unavailable at the time of the interview, leave this SAQ(s) with the respondent. Use the following guidelines to prepare an SAQ.

- Record the name of the person, the PID, the date of birth and the current date.

SAQs may be completed either before you leave the RU, or later and returned by mail. Outstanding SAQs may be collected during a follow-up visit **ONLY IF** you will be returning to collect Authorization Forms.

CL40AA

In Round 5, some RU members are randomly sampled to complete a survey entitled "Your Choices About Your Health."

Persons requested to complete this survey may have returned it to the home office prior to the Round 5 interview date, or they may return the survey to the interviewer at the time of the Round 5 interview or they may prefer to complete it later and mail it back to the home office.

If the respondent or eligible person does not recall this questionnaire, show an example to help refresh his/her memory. The questionnaire is titled "Your Choices About Your Health". The inside of the questionnaires are blue for males and purple for females. If the respondent or eligible person mentions that the questionnaire was lost or misplaced, distribute a blank gender appropriate "Your Choices About Your Health" questionnaire to each person whose name is displayed on the CAPI screen (or has mentioned that a new SAQ is needed). If the person is unavailable at the time of the interview, leave the appropriate male or female version of the questionnaire(s).

Use the following guidelines to prepare a "Your Choices About Your Health" questionnaire:

- Record the name of the person and their date of birth on the front cover. Record region, their RUID, PID, and sex in the box marked 'FOR OFFICE USE ONLY'.

These questionnaires may be completed either before you leave the RU, or later and returned by mail.

Outstanding "Your Choices About Your Health" questionnaires may be collected during a follow up visit **ONLY IF** you will be returning to collect Authorization Forms.

CL67

CALENDAR --

Any calendar used by the respondent to record information **prior** to the MEPS interview. The information may be handwritten or digitally recorded. Examples include the MEPS monthly planner or any other hard-copy or electronic calendar - like calendar apps on a phone or Google calendar.

Do not use this option if you are reconstructing events with a respondent. Instead select the records used to reconstruct events.

ELECTRONIC RECORDS --

Any records accessed electronically or through the internet such as online bank records, online credit card statements, online patient portal information, or records stored in phone apps.

INSURANCE PAYMENT STATEMENT/EOB --

Forms or explanations of benefits (EOBs) received from insurance companies or Medicare or full summaries printed out from an insurance website.

BILL/STATEMENT FROM PROVIDER --

Statements or bills from a doctor's (or other health care provider's) office related to a visit. Some providers give out full summaries of health care if requested.

PHARMACY PATIENT PROFILE --

Print-outs from a pharmacy regarding all the prescriptions received during a given time.

MEDICINE BOTTLE/RECEIPT --

Include any bottle, bag, tube, container or receipt the respondent referenced.

CHECK BOOK --

A physical checkbook or checking account statement.

DOCTOR'S CARD OR APPOINTMENT SLIP --

May have been saved with appointment information or used to gather provider name and address information.

TELEPHONE BOOK --

Code this if a physical phone book was used or if the respondent used an electronic device or an Internet website to look up a name or address.

TAX RETURN/TAX FORM --

1040 forms or schedules used to complete the income or assets sections.

INSURANCE CARDS --

Cards with insurance plan information.

OTHER --

Anything else, such as credit card receipts for other medical equipment, etc.

AC05
AC07
AC08
AC09

USUAL SOURCE OF HEALTH CARE --

The particular medical person, doctor's office, clinic, health center, or other place a person would usually go to if he or she was sick or needed advice about his or her health.

AC11

HOSPITAL CLINIC OR OUTPATIENT DEPARTMENT --

A unit of a hospital, a facility, or 'urgent care center' owned by or affiliated with a hospital. The hospital clinic or outpatient department provides health and medical services to individuals who do not require hospitalization overnight and may also provide general primary care.

Do NOT include 'urgent care centers' which are not owned by, or affiliated with a hospital. Urgent care centers which are NOT affiliated with or owned by a hospital should be coded as a Medical Provider visit.

Examples of outpatient departments include:

- well-baby clinics/pediatric OPD;
- obesity clinics;
- eye, ear, nose, and throat clinics;
- cardiology clinic;
- internal medicine department;
- family planning clinics;
- alcohol and drug abuse clinics;
- physical therapy clinics; and
- radiation therapy clinics.

HOSPITAL EMERGENCY ROOM --

A medical department at a hospital that is open 24 hours a day where no appointment is necessary in order to receive care. Medical care may be administered by a physician, nurse, physician assistant, or other medical provider. Do NOT include 'urgent care centers', which are owned by, or affiliated with a hospital. Visits made to that type of facility should be coded as an outpatient department visit.

OTHER KIND OF PLACE --

A medical place that is not a hospital outpatient department or clinic or a hospital emergency room. Include in this category group practices, private doctor's offices, health clinics, walk-in surgi-center/clinics and urgi-centers/clinics not owned by or affiliated with a hospital, company or school clinics, infirmaries, neighborhood health clinics, family planning centers, and mental health facilities.

AC15

MEDICAL DOCTOR --

Include both doctors of medicine (M.D.) and doctors of osteopathy (D.O.). Specific examples of physicians include:

allergists	obstetricians
anesthesiologists	ophthalmologists
cardiologists	orthopedists
dermatologists	otolaryngologists
endocrinologists	(ear, nose, & throat doctor)
family practice physicians	pediatricians
gastroenterologists	psychiatrists
general physicians	physiatrist (rehab medicine)
geriatricians	radiologists
gynecologists	surgeons (any)
internists	urologists
neurologists	

Types of providers NOT to be counted as medical doctors are chiropractors, dentists, nurses, optometrists, paramedics, podiatrists, psychologists.

AC16

NURSE --

Includes several types of nursing specialists, such as registered nurse (RN), licensed practical nurse (LPN), nurse's aide, occupational health nurse, community health nurse, or public health nurse (PHN).

NURSE PRACTITIONER --

A registered nurse (RN) who has completed additional training beyond basic nursing education. They have qualifications which permit them to carry out expanded health care evaluation and decision-making regarding patient care.

PHYSICIAN'S ASSISTANT --

A Physician Assistant (PA) is a medical person who provides health care services with the direction and supervision of a doctor of medicine (MD) or osteopathic physician (DO). Physician Assistants train for several years in order to earn the certification to perform diagnostic, therapeutic, preventive, and health maintenance services. Not to be confused with non-medical persons who also 'assist' the physician.

MIDWIFE --

A female who practices the art of aiding in the delivery of babies.

CHIROPRACTOR --

Medical persons who practice a system of medicine based on the principles that the nervous system largely determines the state of health and that disease results from nervous system malfunctioning. Treatment consists primarily of the adjustment and manipulation of parts of the body, especially the spinal column.

AC22
AC22OV1
AC22OV2
AC22OV3
AC22OV4

PREVENTIVE HEALTH CARE --

The provider in question provides coverage for care or services that prevent physical or mental health problems. Preventive health care or service may include things such as: immunizations, routine physicals, cholesterol checks, prenatal care, 'stop smoking' classes, nutritional advice, etc.

REFERRAL --

Some health insurance plans require that individuals get authorization before consulting a specialist. This authorization is a referral.

AP12

DENTAL CHECK-UP -

A visit to a dental care provider to check the health status of the person's teeth. It often includes examination, x-rays and/or cleaning and polishing of the teeth.

AP15

BLOOD PRESSURE CHECK -

Application of a device that measures the person's blood pressure. The device typically involves a strap that is placed around the upper arm and inflated. Blood pressure is the pressure exerted by the blood against the inner walls of the blood vessels, especially the arteries; it varies with health, age, emotional stress, etc.

AP16

BLOOD CHOLESTEROL CHECK -

A blood cholesterol check requires taking a blood sample from the person. The blood is then analyzed to determine the level of cholesterol it contains. Cholesterol is a type of fatty substance found in animal fats, blood, nerve tissue, and bile. High levels of cholesterol are thought to be a factor in coronary heart disease.

AP18

FLU VACCINATION -

A flu vaccination protects a patient against "influenza," also called the flu. The vaccine, which may be in the form of a shot given in the arm or a nasal spray, can help to prevent the patient from catching a severe respiratory infection that can be caused by the flu virus.

AP20A

HYSTERECTOMY -

A hysterectomy is an operation in which the uterus or womb is surgically removed.

AP28

MODERATE OR VIGOROUS PHYSICAL ACTIVITY -

Moderate physical activity causes only light sweating or a slight or moderate increase in breathing or heart rate and would include activities such as fast walking, raking leaves, mowing the lawn, or heavy cleaning. Vigorous physical activity causes heavy sweating or large increases in breathing or heart rate and would include activities such as running, race walking, lap swimming, aerobics classes, or fast bicycling.

IN02
IN03

TAX RETURN -

A form on which taxable income is reported and tax is computed. The form is then sent to the appropriate level of the government (e.g., state, federal, etc.). Tax returns can be submitted to the government on paper or electronically by computer or telephone.

IN04

SINGLE -

A tax filing status that can be used by anyone who was never married, legally separated, or widowed and not remarried as of December 31st of the tax year. Reports taxable income of one tax filer.

MARRIED FILING JOINT RETURN -

A tax filing status that can be used by anyone who was married as of December 31st of the tax year (even if person is not living with the spouse at the end of the tax year) or whose spouse died between January 1st of the tax year and April 31st of the following year and the person did not remarry. Reports taxable income of two tax filers: a husband and wife.

MARRIED FILING SEPARATELY -

A tax filing status that can be used by anyone who meets the criteria for 'married filing joint return,' however, the tax return reports the taxable income of ONE tax filer: either the husband OR the wife.

HEAD OF HOUSEHOLD WITH QUALIFYING PERSON -

A tax filing status that can be used by anyone who is UNMARRIED and who paid over half of the cost of keeping up a home that was the main home for all of the tax year for any of the following people:

- the person's parent(s); or
- the person's UNMARRIED child, adopted child, stepchild, grandchild, etc. (the child does not have to be a dependent); or
- the person's MARRIED child, adopted child, stepchild, grandchild, etc. (the child must be a dependent); or
- the person's foster child (the child must be a dependent); or
- any other of the person's relatives who is a dependent

This filing status can also be used by someone who is married and who is legally separated from his/her spouse in the tax year and who:

- has lived apart from his/her spouse for the last six months of the tax year, and
- files a separate return from his/her spouse, and
- paid over half of the cost of keeping up his/her home during the tax year, and
- provided his/her home as the main home of his/her child, adopted child, stepchild, or foster child for more than half of the tax year, and
- claimed this child as his/her dependent.
- Reports taxable income of one tax filer.

QUALIFYING WIDOW(ER) WITH DEPENDENT CHILDREN -

A tax filing status that can be used by anyone whose spouse died in either of the two years previous to the tax year and the person has not remarried in the tax year and who:

- has a child, adopted child, stepchild, or foster child who he/she can claim as a dependent, and
- the child lived in the person's home for all of the tax year, and
- paid over half the cost of keeping up his/her home; and
- could have filed a joint return with his/her spouse the year the spouse died, even if he/she didn't actually do so.

IN05

FILING JOINTLY -

When the person files his/her tax return under the tax filing status of 'married filing joint return.' This tax filing status can be used by anyone who was married as of December 31st of the tax year (even if person was not living with the spouse at the end of the tax year) or whose spouse died between January 1st of the tax year and April 31st of the following year and the person did not remarry. Reports taxable income of two tax filers: a husband and wife.

IN06

DEPENDENTS -

For tax filing purposes, a dependent of the tax filer is someone who meets all of the following criteria:

- is a relative of the tax filer, and
- if married, does NOT file a joint return, and
- is a U.S. citizen or is a resident alien or is a resident of either Canada or Mexico or is the person's adopted child who is not a U.S. citizen, but who lived with the person all year in a foreign country, and
- has a gross income of less than \$2,500, and
- the tax filer had to provide over half the person's total support in the tax year.

IN08

HOUSEHOLD -

The household is all of the family members who are currently living in the RU being interviewed.

IN10

ITEMIZED AND STANDARD DEDUCTIONS --

ITEMIZED DEDUCTION -

When the deduction that is used in the process of determining the tax filer's taxable income is determined by listing and totaling a variety of expenses (e.g., medical expenses, various taxes such as estate or real estate taxes, mortgage interest, charitable contributions, etc.). These expenses are listed on the Schedule A tax form for itemized deductions.

STANDARD DEDUCTION -

When the deduction that is used in the process of determining the tax filer's taxable income is a single dollar amount, determined by the government. This amount is found on a chart in the tax booklet and is based on the tax filing status.

IN15

HEALTH INSURANCE DEDUCTION -

A person may be able to deduct 100% of the amount paid for medical and dental insurance and qualified long-term care insurance for themselves, their spouse and dependents if they are one of the following:

- A self-employed individual with a net profit reported on Schedule C, C-EZ or F.
- A partner with a net earnings from self-employment reported on schedule K-1 (Form 1065), Box 14, code A.
- A shareholder owning more than 2% of the outstanding stock of an S corporation with wages from the corporation reported on form W-2.
- The insurance plan must be established under the self-employed person's business.

If the person responds that he/she does not qualify for this deduction, code '3' (not applicable).

IN17

EARNED INCOME CREDIT -

An amount that can be deducted from the tax filer's net income in determining his/her taxable income. It is available to tax filers who do not have any qualifying children, earned less than \$9,230 in the tax year, and the tax filer(s) are at least 25 years old on the last day of the tax year.

IN18

IN18OV

AMOUNTS TO INCLUDE (FOR WAGES OR SALARY, TIPS, COMMISSIONS, OR BONUSES) -

This includes all income from wages, salary, commissions, and bonuses and is shown in Box 2 of the tax filer's W-2 form. Tips, scholarships, fellowship grants, and dependent care benefits should also be included.

IN19

IN19OV

AMOUNTS TO INCLUDE (FOR INTEREST FROM SAVINGS ACCOUNTS, BONDS, NOW ACCOUNTS, MONEY MARKET ACCOUNTS, OR SIMILAR TYPES OF INVESTMENTS) -

Include interest income from seller-financed mortgages, banks, savings and loan associations, money market certificates, credit unions, savings bonds, etc. These amounts can be found on forms 1099-INT or 1099-OID.

IN20

DIVIDENDS -

Money that is divided among stockholders, creditors, members of a cooperative, etc. These amounts can be found on form 1099-DIV.

IN21

INCOME TAX REFUNDS -

These amounts represent that part of a refund of State (and Local, if applicable) income tax attributable to itemized deductions taken in a prior year that resulted in a Federal tax benefit. Typically the taxpayer reports as an itemized deduction for Federal income taxes the amount of State (and Local) income tax withheld from their earnings during the year. If the tax filer has more State and Local income tax withheld during the year than was required, the State government will reimburse or "refund" the over-payment during the following year.

IN22

ALIMONY -

An allowance that the court orders paid to a person by his/his spouse or former spouse after a legal separation or divorce or while legal action is pending.

IN23

IN23OV1

IN23OV2

AMOUNTS TO INCLUDE (FOR EARNINGS OR LOSS FROM OWN FARM) -

Include income or loss associated with being the sole proprietor of a farm. Farm business costs and expenses are deductible from farm gross business receipts in arriving at farm net profit or loss. Gains and losses from these sources are calculated on Schedule F.

AMOUNTS TO INCLUDE (FOR NON-FARM BUSINESS OR PRACTICE) -

Include income or loss associated with being the sole proprietor of a non-farm business, including self-employed members of a profession. Business costs and expenses are deductible from gross receipts or gross sales in arriving at net profit or loss. Compensation of the sole proprietor is taxable income and, therefore, not allowed as a business deduction in computing net income. The net gain or loss is computed on Schedule C or C-EZ.

IN24

IN24OV

AMOUNTS TO INCLUDE (FOR NET GAIN/LOSS FROM SALE OF PROPERTY OR OTHER ASSETS) -

Both sales of capital and non-capital assets are to be included. In general, capital assets for tax purposes include all property held for personal use or investment. Examples of such assets are personal residences, furniture, automobiles, and stocks and bonds. Net gains or losses from the sale of capital assets are reported on

Schedule D. Net capital gains also include capital gain distributions reported directly on Form 1040 if the tax filer did not have other gains or losses to report on Schedule D. Property other than capital assets generally includes property of a business nature, and net gains or losses from the sale of such assets is reported on Form 9747.

IN25
IN25OV

IRA (INDIVIDUAL RETIREMENT ACCOUNT) -

An Individual Retirement Account, or IRA, is a personal retirement plan whereby a limited amount of annual earnings may be invested, as in mutual funds or a savings account, with the investment money and its earnings being tax-free until retirement. Payments from these accounts must be reported on the tax filer's income tax return. Payments include regular distributions, early distributions, rollovers, and any other money or property the person received from his/her IRA account or annuity. These amounts can be found on form 1099-R.

KEOGH ACCOUNT -

A retirement plan for self-employed persons and certain groups of employees whereby a limited amount of annual earnings may be invested, as in mutual funds or a savings account, with the invested money and its earnings being tax-free until retirement. These amounts can be found on form 1099-R.

401K -

A 401(k) is an optional retirement plan supported by many companies. This money is taken out and invested **before** the employee's paycheck is taxed. The plan is set up by a qualified employer with the primary contributions being deposited by the employee. Often there is a company matching plan where they will also contribute a percentage of the money the employee contributed. While the 401(k) continues to grow, taxes will not be paid on it. When the employee withdraws the money at retirement, he/she will be taxed on the amount in the account. There is a penalty to remove the money prior to retirement age; however, many plans allow the employee to borrow money using the plan as collateral or remove the money without penalty in certain emergencies. These amounts can be found on form 1099-R.

IN26

AMOUNTS TO INCLUDE (FOR PRIVATE PENSIONS, MILITARY RETIREMENT, OTHER FEDERAL EMPLOYEE PENSIONS, STATE OR LOCAL GOVERNMENT PENSIONS OR ANNUITIES) -

Payments from pensions and annuities, including payments (distributions) from retirement plans, life insurance annuity contracts, profit-sharing plans, employee savings plans, disability pensions received after the tax filer has reached the minimum retirement age set by his/her employer.

IN28
IN280V

AMOUNTS TO INCLUDE (NET GAIN OR LOSS FROM ESTATES OR TRUSTS,
PARTNERSHIPS, S CORPORATIONS, ROYALTIES, OR RENTAL INCOME) -
Gains and losses from these sources are calculated on Schedule E.

ESTATE OR TRUST: Include income that was the beneficiaries' share
of fiduciary income from any estate or trust, for example,
income required to be distributed, amounts credited to
beneficiaries' accounts from fiduciary income, and any
"accumulation distribution" made by the fiduciary of a "complex
trust" for income accumulated in prior tax years.

PARTNERSHIP OR S CORPORATION: Since partnerships and
S corporations are not taxable entities, their net profit or
loss is taxed, in general, directly to the members of the
partnership or shareholders in the S corporation. This income
includes the taxpayer's share of the ordinary gain or loss of
the enterprise and certain payments made to the taxpayer for the
use of capital or as a salary.

RENTAL INCOME: Income or loss less amounts for depreciation,
repairs, improvements and other allowable expenses related to
the rented property.

ROYALTIES: Income from oil, gas and other mineral rights,
patents, and literary, musical or artistic works.

IN30
IN300V

UNEMPLOYMENT COMPENSATION -
Payments made by a State government to a person who is unemployed.
Payments are usually at regular intervals and over a fixed period of
time. These amounts can be found on form 1099-G.

IN31
IN310V

SOCIAL SECURITY --
Social Security is also known as the Old Age, Survivors and
Disability Insurance program (OASDI), in reference to its three
parts:

RETIREMENT BENEFITS -
The amount of the monthly benefit depends upon previous
earnings and upon the age at which the person chooses to begin
receiving benefits. The earliest age at which benefits are
payable is 62.

DISABILITY -

A person who has worked long enough and recently enough to be covered can receive benefits upon becoming totally disabled, regardless of his or her age. The person must be unable to continue in his or her previous job and unable to adjust to other work; furthermore, the disability must be long-term (lasting or expected to last for at least one year or to result in death). The amount of the disability benefit payable depends on the person's age and previous earnings.

SURVIVORS' BENEFITS -

If a worker covered by Social Security dies, a surviving spouse or children can receive survivors' benefits. Sometimes, survivors' benefits are available to a divorced spouse. Children cannot receive survivors' benefits after age 19 unless the child was disabled before age 22.

IN34

WORKER'S COMPENSATION -

A system, required by law, of compensating workers injured or disabled in connection with work. This system establishes the liability of an employer for injuries or sickness that arise over and in the course of employment. The liability is created without regard to the fault or negligence of the employer. The benefits under this system generally include hospital and other medical payments and compensation for loss of income.

IN37

S.S.I. (SUPPLEMENTAL SECURITY INCOME) -

Also known as Supplemental Security Income (SSI), this federal program provides monthly cash payments in accordance with uniform, nationwide eligibility requirements to persons of all ages who are blind, disabled, or both needy and 65 years or older.

IN41

PUBLIC ASSISTANCE -

Public assistance payments include assistance payments made to low-income persons, such as temporary assistance for needy families (TANF), and general assistance.

IN44

TANF (TEMPORARY ASSISTANCE FOR NEEDY FAMILIES) -

This is a cash assistance program. TANF is known by different names in different states. Temporary Assistance for Needy Families (TANF) provides assistance and work opportunities to needy families.

IN46

CHILD SUPPORT -

Payments that the court orders a parent to pay to cover the cost of the care of a child who is not living with the parent making the payment.

IN47

WHO TO INCLUDE (FOR RECEIVING CHILD SUPPORT) -

Any/all members of RU are eligible to receive child support. Child support are payments that the court orders a parent to pay to cover the cost of the care of a child who is not living with the parent making the payment.

IN49

VETERAN'S PAYMENTS -

Veterans' payments include payments made periodically by the Department of Veterans Affairs to disabled members of the Armed Forces or to survivors of deceased veterans for education and on-the-job training, and means-tested assistance to veterans.

IN52

REGULAR CASH CONTRIBUTIONS AND HOUSEHOLD

REGULAR CASH CONTRIBUTIONS -

Include periodic payments from non-household members. Gifts or sporadic assistance from persons outside the household are not included.

HOUSEHOLD -

The household is all of the family members who are currently living in the RU being interviewed.

IN55

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) --

SNAP (formerly known as the Food Stamp Program) enables eligible low-income households to buy nutritious food with electronic benefits they can use like a debit card to purchase food at stores authorized by USDA.

IN59

IN60

IN60OV

IN63

WAGES AND SALARY --

WAGES -

Money paid by an employer for each hour the person works. Hours worked beyond 40 hours a week might be compensated at a higher rate than regular hours. There is a direct link between compensation and hours worked.

SALARY -

Money paid by an employer for the performance of a job, regardless of how many hours are worked. The workers are not paid on an hourly basis and might not receive compensation for hours worked beyond 40 hours per week. In essence, there is little or no link between compensation and hours worked.

FARM INCOME (OR LOSS) --

Include income or loss associated with being the sole proprietor of a farm. Farm business costs and expenses are deductible from farm gross business receipts in arriving at farm net profit or loss. Gains and losses from these sources are calculated on Schedule F.

BUSINESS INCOME (OR LOSS) --

Include income or loss associated with being the sole proprietor of a non-farm business, including self-employed members of a profession. Business costs and expenses are deductible from gross receipts or gross sales in arriving at net profit or loss. Compensation of the sole proprietor is taxable income and, therefore, not allowed as a business deduction in computing net income. The net gain or loss is computed on Schedule C or C-EZ.

SOCIAL SECURITY --

Social Security is also known as the Old Age, Survivors and Disability Insurance program (OASDI), in reference to its three parts:

RETIREMENT BENEFITS -

The amount of the monthly benefit depends upon previous earnings and upon the age at which the person chooses to begin receiving benefits. The earliest age at which benefits are payable is 62.

DISABILITY -

A person who has worked long enough and recently enough to be covered can receive benefits upon becoming totally disabled, regardless of his or her age. The person must be unable to continue in his or her previous job and unable to adjust to other work; furthermore, the disability must be long-term (lasting or expected to last for at least one year or to result in death). The amount of the disability benefit payable depends on the person's age and previous earnings.

SURVIVORS' BENEFITS -

If a worker covered by Social Security dies, a surviving spouse or children can receive survivors' benefits. Sometimes, survivors' benefits are available to a divorced spouse. Children cannot receive survivors' benefits after age 19 unless the child was disabled before age 22.

RAILROAD RETIREMENT --

A federally legislated program which provides retirement, disability, and survivor annuities to workers whose employment was connected with the railroad industry for at least 10 years. The system provides for close coordination with the Social Security system. Benefits are financed through a combination of employee, employer, and Federal Government contributions.

PRIVATE, MILITARY, OR GOVERNMENT PENSIONS --

Pensions are employee benefits which provide income payments to employees upon their retirement. Pensions provide benefits to employees who have met specified criteria, normally age and/or length of service requirements. Pensions can be paid by various employers including private companies, the military, or any level of the government.

INTEREST --

Money paid to a person as compensation for the use of his/her money that is held in seller-financed mortgages, banks, savings and loan associations, money market certificates, credit unions, savings bonds, etc.

DIVIDENDS --

Money that is divided among stockholders, creditors, members of a cooperative, etc.

RENTAL INCOME (OR LOSS) --

Income or loss less amounts for depreciation, repairs, improvements and other allowable expenses related to the rented property.

AS04

VALUE (FOR 'THIS HOME') --

When determining the present value of real estate (the primary residence), we want to know the market value for the land and structures on that land. This would be the amount the property would bring if sold in the current real estate market. The respondent should not report the profit he or she would make if the property was sold, but the actual sale price that could be achieved.

If the respondent has no idea what the property would bring in the current market, the tax appraisal value may be entered instead.

AS06

MORTGAGES AND OUTSTANDING LOANS --

MORTGAGES -

Include only the principal balance that has not yet been paid. The respondent should not include items such as interest, property tax, insurance, escrow, etc. that might be included in the mortgage payments.

OUTSTANDING LOANS -

These are loans that have not been paid in full, that is, money is still owed.

AS07

AS14

CURRENTLY OWED (FOR REAL ESTATE AND VEHICLES) --

Include only the principal balance that has not yet been paid. The respondent should not include items such as interest, property tax, insurance, escrow, etc. that might be included in the mortgage or vehicle payments.

AS11

VALUE (FOR VEHICLES) --

When determining the present value of transportation vehicles, we want to know the market value for the vehicles. This would be the amount the vehicles would bring if sold in the current market. The respondent should not report the profit he or she would make if the vehicle(s) were sold, but the actual sale price(s) that could be achieved.

AS13

MONEY OWED AND OUTSTANDING LOANS (FOR VEHICLES) --

MONEY OWED -

Include only the principal balance that has not yet been paid. The respondent should not include items such as interest, that might be included in the vehicle payments.

OUTSTANDING LOANS -

These are loans that have not been paid in full, that is, money is still owed.

AS16

RETIREMENT ACCOUNTS --

IRA -

An Individual Retirement Account, or IRA, is a personal retirement plan whereby a limited amount of annual earnings may be invested, as in mutual funds or a savings account, with the investment money and its earnings being tax-free until retirement. Payments from these accounts must be reported on the tax filer's income tax return. Payments include regular distributions, early distributions, rollovers, and any other money or property the person received from his/her IRA account or annuity.

401K -

A 401(k) is an optional retirement plan supported by many companies. This money is taken out and invested **before** the employee's paycheck is taxed. The plan is set up by a qualified employer with the primary contributions being deposited by the employee. Often there is a company matching plan where they will also contribute a percentage of the money the employee contributed.

403(b) ACCOUNT -

A 403(b) is a retirement savings plan available for public education organizations, some non-profit employers and self-employed ministers in the United States. It is similar to a 401(k) plan where part of the employee's salary is taken out and invested in the 403(b) plan before income tax is paid on it. The investment is allowed to grow tax deferred until the money is taxed as income when taken out of the plan.

KEOGH ACCOUNT -

A retirement plan for self-employed persons and certain groups of employees whereby a limited amount of annual earnings may be invested, as in mutual funds or a savings account, with the invested money and its earnings being tax-free until retirement.

AS18

VALUE (FOR RETIREMENT ACCOUNTS) --

The amount of money you would receive today if you withdrew all the money in these types of accounts. Do not deduct from this amount any penalties that might be incurred because of early withdrawal.

AS20

BANK ACCOUNTS --

CHECKING ACCOUNTS -

A bank account against which the depositor can draw checks for transfer of funds to the name on the check. Checking accounts may or may not bear interest.

SAVINGS ACCOUNTS -

A bank account that bears interest. Generally, deposits and withdrawals of funds are done at the banking institution with withdrawn funds going directly to the holder of the account or another of his or her bank account.

MONEY MARKET ACCOUNTS -

An account that requires that you keep a minimum balance and allows you to write checks, but limits the number you may write and has a minimum allowable amount of each check written.

AS22

VALUE (FOR BANK ACCOUNTS) --

The amount you would receive if you withdrew all the money in these accounts today. Do not deduct from this amount any penalties that might be incurred because of early withdrawal.

AS24

OTHER ACCOUNTS OR FINANCIAL ASSETS -

CERTIFICATES OF DEPOSIT (CDs) -

A bank certificate acknowledging the receipt of a specified large sum of money in a special kind of time deposit drawing interest and requiring written notice of withdrawal and usually subject to financial penalties if withdrawals are made before the maturity date. Also known as CDs.

GOVERNMENT SAVINGS BONDS -

Any of various series of interest-bearing certificates issued by a government (local, state, or federal) promising to pay the holder a specified sum on a specified date, usually maturing over long periods.

INDIVIDUAL DEVELOPMENT ACCOUNTS -

Matched savings accounts that enable people with low incomes to save money and build assets. Every dollar that is saved in an IDA will be matched with donations from government agencies, non-profit organizations and private companies

TREASURY BILLS -

Also called T-bills. Treasury Bills mature in one year or less. They do not pay interest prior to maturity; instead they are sold at a discount of the face value.

BONDS, BOND MUTUAL FUNDS -

A certificate of debt issued by a corporation, government (local or federal), or foreign country that guarantees payment of the original investment plus interest by a specified future date.

SHARES OF STOCK -

The capital or funds that a corporation raises through the sale of shares entitling the holder to dividends and the other rights of ownership.

STOCK MUTUAL FUNDS -

A company without fixed capitalization freely buys and sells its own shares and uses the capital to invest in other companies.

EDUCATION SAVINGS ACCOUNTS -

Education Savings Accounts can refer to 529 plans or Coverdell Education Savings Accounts.

529 PLANS -

There are two types of 529 plans: prepaid and savings.

PREPAID - Prepaid plans allow one to purchase tuition credits, at today's rates, to be used in the future. Therefore, performance is based upon tuition inflation. May be administered by states or higher education institutions.

SAVINGS - Savings plans are different in that all growth is based upon market performance of the underlying investments, which typically consist of mutual funds. May be administered by states, but record-keeping and administrative services are usually delegated to a mutual fund company or other financial services company.

COVERDELL EDUCATION SAVINGS ACCOUNT -

Also known as an Education Savings Account, a Coverdell ESA, a Coverdell Account, or just an ESA and formerly known as an Education Individual Retirement Account. Coverdell ESAs allow money to grow tax deferred and proceeds to be withdrawn tax free for qualified education expenses at a qualified institution. Qualified expenses in an ESA includes primary and secondary school, not just college and university.

ANNUITIES -

A contract sold by an insurance company designed to provide payments to the holder at specified intervals, usually after retirement. The holder is taxed only when they start taking distributions or if they withdraw funds from the account. All annuities are tax-deferred, meaning that the earnings from investments in these accounts grow tax-deferred until withdrawal. Annuity earnings are also tax-deferred so they cannot be withdrawn without penalty until a certain specified age. Fixed annuities guarantee a certain payment amount, while variable annuities do not.

BENEFICIARY TO A TRUST -

Another person's asset is being held in your name by a third party.

AS26

VALUE (FOR OTHER FINANCIAL ASSETS) --

The total amount that would be received if all of the 'other' assets were sold or otherwise converted to cash.

This includes any amounts you would receive if you withdrew all the money in any financial account today. Do **not** deduct from this amount any penalties that might be incurred because of early withdrawal.

AS28

ALL OTHER PROPERTY AND ASSETS --

SECOND HOME -

Includes any other homes an RU member owns (i.e., the RU member's name is on the title) other than his or her primary residence. Examples include vacation homes and housing units that are rented to others.

REAL ESTATE -

Land, including the buildings and improvements on it and its natural assets, such as minerals, water, etc.

BUSINESS -

A business exists when one or more of the following conditions are met: (1) Machinery or equipment of substantial value is in use in conducting business; (2) an office, store or other place of business is maintained, or (3) the business is advertised by listing in the classified section of the phone book, displaying a sign, distributing cards or leaflets, or any other methods which publicize that the work or service is offered to clients.

FARM -

Includes buildings on the premises of a farm, such as a barn or farm house, or on any land that is part of the farm, such as land under cultivation.

RECREATIONAL VEHICLES -

Vehicles used for the purpose of relaxation or amusement such as mopeds, camping trailers, motor homes, boats, airplanes, jet skis, snowmobiles, gliders, canoes, kayaks, or hang gliders, etc.

OTHER SIGNIFICANT ASSETS -

Include any savings or assets owned by an RU member that have not already been accounted for in previous questions. For example, cash stored in the home, jewelry, art, antiques, money owed to an RU member by others, or a collection for investment purposes ('collectibles' such as coins, postage stamps, baseball cards, etc.).

AS30

VALUE (FOR OTHER PROPERTIES OR ASSETS) --

The total amount that would be received if all of the 'other' assets were sold or otherwise converted to cash.

IF REAL ESTATE -

We want to know the market value for the land and structures on that land. This would be the amount the property would bring if sold in the current real estate market. The

respondent should not report the profit he or she would make if the property was sold, but the actual sale price that could be achieved.

If the respondent has no idea what the property would bring in the current market, the tax appraisal value may be entered instead.

IF BUSINESS OR FARM -

We want to know the market value of the land, structures, equipment, and other capital on that land. This would be the amount the farm or business would bring if sold in the current market.

The respondent should not report the profit he or she would make if the farm or business was sold, but the actual sale price that could be achieved. Also, income from the farm or business should not be included at this question.

IF BOAT OR RECREATIONAL VEHICLE -

We want to know the market value for the vehicles. This would be the amount the vehicles would bring if sold in the current market. The respondent should not report the profit he or she would make if the vehicle(s) were sold, but the actual sale price(s) that could be achieved.

IF JEWELRY, ART WORK, ANTIQUES, COLLECTIBLES, ETC. -

We want to know the market value for the item(s). This would be the amount the item(s) would bring if sold in the current market. The respondent should not report the profit he or she would make if the item (s) were sold, but the actual sale price(s) that could be achieved.

If the respondent has no idea what the item(s) would bring in the current market, the appraisal value may be entered

AS32

MONEY OWED AND OUTSTANDING LOANS (FOR OTHER PROPERTY AND ASSETS) --

MONEY OWED -

Include only the principal balance that has not yet been paid. The respondent should not include items such as interest, property tax, insurance, escrow, etc. that might be included in the mortgage, vehicle, or loan payments.

OUTSTANDING LOANS -

These are loans that have not been paid in full, that is, money is still owed.

AS33

CURRENTLY OWED (FOR OTHER PROPERTY AND ASSETS) --

Include only the principal balance that has not yet been paid. The respondent should not include items such as interest, property tax, insurance, escrow, etc. that might be included. in the mortgage, vehicle, or loan payments.

AS35

DEBTS --

A financial obligation or liability of one person to another or others. Includes formal arrangements such as bank loans and credit card debt as well as private arrangements such as loans from a parent. A debt might or might not include interest on the principal loan amount.

AS37

DEBTS AMOUNT TO --

Include only the principal balance that has not yet been paid for all debts other than those specifically asked about in previous questions. The respondent should not include items such as interest, property tax, insurance, escrow, etc. that might be included in debt payments.

CS28
CS280V
CS29
CS290V
CS30
CS300V
CS31
CS310V
CS32
CS320V
CS33
CS330V
CS35
CS350V

"ADVICE TO YOU" --

"Advice to you" can mean advice given to anyone in the RU or a parent or guardian outside of the RU on behalf of (PERSON) by any type of doctor or other health provider. Include advice given in either written or verbal form.

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse, or anyone else (PERSON) would see for health care.

CS34
CS34OV

"ADVICE TO YOU (ABOUT HELMETS)" --

"Advice to you" can mean advice given to anyone in the RU or a parent or guardian outside of the RU on behalf of (PERSON) by any type of doctor or other health provider. Include advice given in either written or verbal form.

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse, or anyone else (PERSON) would see for health care.

In addition to advice given to you about (PERSON) using a helmet when riding a bicycle or motorcycle, please also include advice given to you about children wearing helmets when riding ATV's, battery powered cars, on the back of an adult's bicycle, or in jogging strollers.

PE02

HYPERTENSION -

Hypertension, is also known as high blood pressure. It is defined as a long-term high resting systolic blood pressure (the "top" number, which represents the pressure generated when the heart beats) above 140, and/or high diastolic blood pressure (the "bottom" number, which represents the pressure in the vessels when the heart is at rest) above 90. Hypertension often has no symptoms, though patients often complain of headaches. Treatment typically includes medications and lifestyle changes, such as weight loss, exercise, and dietary adjustments. Do NOT include pregnancy-induced hypertension, also known as preeclampsia, for this question.

Preeclampsia, can happen in late pregnancy and is characterized by persistently high blood pressure, swelling of the extremities, and protein in the urine. Typically with pregnancy-induced hypertension, blood pressure returns to normal shortly after delivery.

PE11

OTHER TYPES OF HEART CONDITIONS TO INCLUDE --

If 'coronary heart disease', 'angina', 'heart attack', or 'myocardial infarction' are mentioned, back up to PE05, PE07, or PE09, as appropriate.

Include any other types of heart conditions or diseases affecting the person during his or her lifetime. This includes, but is not limited to, congenital heart diseases, heart murmurs, irregular heartbeat, arrhythmias, cardiomyopathy, inflammatory heart disease, and valvular heart disease.

PE13

TRANSIENT ISCHEMIC ATTACK --

A transient ischemic attack (TIA) is an episode that occurs when the blood supply to part of the brain is briefly interrupted. TIA symptoms, which usually occur suddenly, are similar to those of stroke but do not last as long. Most symptoms of a TIA disappear within an hour, although they may persist for up to 24 hours. Symptoms can include muscle weakness, numbness on one side of the body, trouble speaking, swallowing, and memory loss among others. A TIA is often considered a warning sign that a true stroke may happen in the future if something is not done to prevent it.

PE15

EMPHYSEMA --

Emphysema is a long-term, progressive disease in which the air sacs in the lungs become damaged. Its primary symptom is progressive shortness of breath. Emphysema is one of several diseases known collectively as chronic obstructive pulmonary disease (COPD).

PE17

Bronchitis is an inflammation of the lungs caused by infection or by inhaling irritating fumes. Symptoms include cough, fever, and chest pain.

ACUTE BRONCHITIS --

Acute bronchitis develops suddenly. It generally lasts less than 2 weeks. Most healthy people who develop bronchitis get better without any complications.

CHRONIC BRONCHITIS --

Chronic bronchitis becomes long-term. A cough that lasts for at least 3 months to two years in a row suggests chronic bronchitis. It is a form of COPD (chronic obstructive pulmonary disease).

PE25

REMISSION --

A complete or partial disappearance of the signs and symptoms of disease in response to treatment. This is generally the period during which a disease is under control. A remission, however, is not necessarily a cure.

PE26

DIABETES -

Diabetes is a health problem caused by decreased production of insulin, or by decreased ability to use insulin. Insulin is a hormone produced by the pancreas that is necessary for cells to be able to use blood sugar. Diabetes occurs in several forms, the most common are: Type I, Type II, and gestational diabetes. However, do NOT include any occurrence of gestational diabetes for this question.

Gestational diabetes starts or is first recognized during pregnancy. It usually becomes apparent during the 24th to 28th weeks of pregnancy. In many cases, the blood-glucose level returns to normal after delivery.

PE30

Arthritis is an inflammation of one or more joints of the body, usually with pain, redness, and stiffness.

RHEUMATOID ARTHRITIS --

Rheumatoid arthritis is a chronic disease that can affect joints in any part of the body. The immune system mistakenly causes the joint lining to swell.

OSTEOARTHRITIS --

Osteoarthritis is the most common type of arthritis. It occurs when the cartilage wears away, and can occur in any joint, but often affects the hands, knees, hips, and joints in the spine. Osteoarthritis is sometimes called degenerative joint disease.

PE32

ASTHMA -

Asthma is a lung problem that makes breathing difficult. Asthma causes attacks of wheezing but there are also time periods with relatively normal breathing. Treatment for mild asthma (rare attacks) typically includes the use of inhalers on an as-needed basis. Treatment for significant asthma (symptoms occur at least every week) typically includes the regular use of anti-inflammatory medications, usually inhaled steroids and bronchodilators.

PE34

ASTHMA ATTACK -

When you have an asthma attack, your airways narrow in response to some form of irritation, or "trigger," making breathing difficult. The muscles around the airways also tighten, further closing off breathing. The resulting symptoms include coughing, wheezing, shortness of breath, and a tight feeling in the chest. In a severe attack, breathing may be blocked. Asthma "attacks" range from mild to life threatening and can last minutes to days.